

**MANTECA UNIFIED SCHOOL DISTRICT
UNIFORM COMPLAINT PROCEDURES (UCP) FORM**

A Uniform Complaint consists of:

- *Allegations of discrimination, harassment, intimidation, and/or bullying;
- *Allegations that federal or state laws or regulations governing educational programs or activities have been violated;
- *Allegations that students were required to pay fees, deposits, or other charges for participating in educational programs or activities;
- *Allegations that MUSD failed to comply with the requirements of the Local Control Accountability Plan (LCAP).

Report all alleged violations in these areas by Manteca Unified School District through the Uniform Complaint Process. (UCP). The School Board encourages the early, informal resolution of complaints at the school site level. Complaints may be made to the school site administrator or the District Complaint/Compliance Officer. Written complaints may be mailed to the Personnel Department at P.O. Box 32, Manteca, CA 95336; hand delivered to the District Office at 2271 W. Louise Ave., Manteca; or emailed to complaints@musd.net.

All investigations into Uniform Complaints shall be made in accordance with Board Policy/Administrative Regulation 1312.3.

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| Name: | First: | Last: | |
| I am a: | <input type="checkbox"/> Student <input type="checkbox"/> Parent | <input type="checkbox"/> Certificated Employee <input type="checkbox"/> Classified Employee | <input type="checkbox"/> School Administrator <input type="checkbox"/> Other (please describe) |
| Street: | | | |
| City: | | Zip Code: | |
| Phone: | | Email: | |
| Today's date: | | Mediation requested: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Date(s) of problem(s): | | | |
| School site: | | | |
| ALLEGATIONS OF DISCRIMINATION, HARASSMENT, INTIMIDATION, AND/OR BULLYING | | | |
| 1. The person who discriminated, harassed, intimidated, and/or bullied me or another person is a: | <input type="checkbox"/> Student <input type="checkbox"/> Parent | <input type="checkbox"/> Certificated Employee <input type="checkbox"/> Classified Employee | <input type="checkbox"/> School Administrator <input type="checkbox"/> Other (please describe) |
| | The name(s) of the individual(s) who discriminated, harassed, intimidated, and/or bullied me or another person is/are: | | |
| 2. This person's behavior can best be described as: | <input type="checkbox"/> Discrimination <input type="checkbox"/> Harassment | <input type="checkbox"/> Intimidation <input type="checkbox"/> Bullying | <input type="checkbox"/> Other (please describe) |
| | The specific action(s) this person engaged in is/are: | | |
| 3. Witness(es) to unlawful discrimination, harassment, intimidation, or bullying is/are: | <input type="checkbox"/> Student <input type="checkbox"/> Parent <input type="checkbox"/> There were no witness(es) | <input type="checkbox"/> Certificated Employee <input type="checkbox"/> Classified Employee | <input type="checkbox"/> School Administrator <input type="checkbox"/> Other (please describe) |
| | The name(s) of the individual(s) who witnessed this harassment and/or discrimination is/are: | | |
| 4. This unlawful discrimination, harassment, intimidation, and/or bullying has already been reported to the following: | <input type="checkbox"/> Student <input type="checkbox"/> Parent <input type="checkbox"/> I have not reported this incident(s) to anyone before | <input type="checkbox"/> Certificated Employee <input type="checkbox"/> Classified Employee | <input type="checkbox"/> School Administrator <input type="checkbox"/> Other (please describe) |
| | The name(s) of the individual(s) who were told about this incident(s) is/are: | | |
| 5. Type of unlawful discrimination, harassment, intimidation, and/or bullying: | <input type="checkbox"/> Verbal | <input type="checkbox"/> Written (including emails) | <input type="checkbox"/> Physical |
| | Please give examples of what was done: | | |

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| 6. I believe unlawful discrimination, harassment, intimidation, and/or bullying was based on: | <input type="checkbox"/> Actual or perceived sex <input type="checkbox"/> Sexual orientation <input type="checkbox"/> Ethnic group identification/Ethnicity <input type="checkbox"/> Race/Color <input type="checkbox"/> National origin/Nationality/Ancestry <input type="checkbox"/> Religion <input type="checkbox"/> Medical Condition <input type="checkbox"/> Retaliation | <input type="checkbox"/> Marital Status <input type="checkbox"/> Mental or physical disability <input type="checkbox"/> Age <input type="checkbox"/> Gender <input type="checkbox"/> On the basis of a person's association with a person or group with one or more of these actual or perceived characteristics <input type="checkbox"/> Or because I am perceived to be in a protected category |
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ALLEGATIONS THAT FEDERAL OR STATE LAWS OR REGULATIONS GOVERNING EDUCATIONAL PROGRAMS OR ACTIVITIES HAVE BEEN VIOLATED

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| 7. Failure of a MUSD educational program or activity to comply with federal or state laws or regulations. Type of program or activity: | <input type="checkbox"/> Career/Technical Education <input type="checkbox"/> Child Care and Development Programs <input type="checkbox"/> Special Education Programs <input type="checkbox"/> Child Nutrition Programs <input type="checkbox"/> Migrant Education <input type="checkbox"/> Adult Education | <input type="checkbox"/> State Consolidated Categorical Aid Programs (Professional Development Program, State Compensatory Education, Limited English Proficient (EL), School Improvement Program (SIP), and tenth-grade counseling), school library programs, Economic Aid Impact (EIA) Programs, Miller-Unruh basic reading programs <input type="checkbox"/> Federal Consolidated Categorical Programs (Title I, Title II, Title III, Title IV, Title V, Title IX) |
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| 8. The federal or state law or regulation that was violated is: | Please give examples of what was done: |
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ALLEGATIONS THAT STUDENTS WERE REQUIRED TO PAY FEES, DEPOSITS, OR OTHER CHARGES FOR PARTICIPATING IN EDUCATIONAL PROGRAMS OR ACTIVITIES

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| 9. I was charged pupil fees: | <input type="checkbox"/> For school or classes <input type="checkbox"/> As a condition for participating in a class or an extracurricular activity | <input type="checkbox"/> As a security deposit for a lock, locker, book, class apparatus, musical instrument, clothes, or other materials or equipment <input type="checkbox"/> To obtain materials, supplies, equipment, or clothes associated with an educational activity |
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| 10. The fee was to be used for: | Please give examples of what was done: |
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ALLEGATIONS THAT MUSD FAILED TO COMPLY WITH THE REQUIREMENTS OF THE LOCAL CONTROL ACCOUNTABILITY PLAN (LCAP)

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| 11. I believe MUSD failed to comply with the requirements of the Local Control Accountability Plan (LCAP): | Please give examples of what was done: |
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FOR ALL UNIFORM COMPLAINTS

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| Please describe your complaint in detail. You may attach additional pages if necessary. | Specific nature of the complaint; include names, dates, times, locations, witnesses, etc.: |
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| <i>Please describe what steps you have already taken to resolve your complaint.</i> | <u>Dates and results of any previous meetings with site/district personnel regarding your concerns:</u> |
| <i>What would you like the District to do as a result of your complaint?</i> | <u>Suggested remedy:</u> |

Signature _____

Date _____

The School Board prohibits retaliation in any form for the filing of a complaint or participation in complaint procedures. Such participation shall not in any way affect the status, grades, or work assignments of the complainant or persons involved in the complaint investigation/resolution process. The identification of a complainant will remain confidential as appropriate.

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| <i>If applicable, explain why you believe that you were retaliated against for filing a complaint on any of the grounds above.</i> | <u>Please give examples of retaliation:</u> |
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Signature _____

Date _____