

VISTA CHARTER PUBLIC SCHOOLS

2900 West Temple Street
Los Angeles, CA 90026
T 213 201-4000 | F 213 201-5861
www.vistacharterps.org

Dr. Don Wilson, Superintendent



Stakeholder Complaint Form

The complaint form below may be used to file a complaint with Vista Charter Public Schools. It is provided for your convenience only and need not be used; however, the information requested in this form should be provided to the school in a substantially similar format if you choose not to use this form.

Please submit your complaint in a sealed envelope to the Superintendent during regular business hours. On the envelope, please address the form to:

Vista Charter Public Schools
ATTN: Superintendent
Parent Complaint Form

The complaint may be hand delivered to the front office at your school in a sealed envelope. It will be treated confidentially and will not be opened by anyone other than the Superintendent. You may also mail the complaint to:

Dr. Donald Wilson, Superintendent
Vista Charter Public Schools
2900 W. Temple St.
Los Angeles, CA 90026

PLEASE NOTE: If your complaint is about the Superintendent, please change the ATTN: to the Board President.

Procedures

1. The Superintendent (or School Board) shall first review the complaint and consult with legal counsel to determine if the complaint qualifies as a uniform complaint and should be processed as such. The Superintendent shall notify the parent in writing of its decision within three (3) business days of receipt of the complaint.
2. If the decision is that the complaint is not subject to the uniform complaint policies and procedures, the Superintendent shall schedule a meeting with the parent to discuss the complaint and possible resolutions. This meeting shall be scheduled within ten (10) business days of receipt of the complaint.
3. The Superintendent shall provide a written determination to the parent of any actions, agreements or other resolutions agreed to or not agreed to at the meeting within five (5) business days of the meeting.

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Complaint Form

Your Name: _____

Your relationship to the school: _____

Example: Parent, Staff, Student, Board Member, etc.

Contact Phone Number: _____

Other contact information (optional): _____

Have you contacted the Principal of your school about your complaint?

Yes No

If yes, what was the outcome? _____

If no, why not? _____

Have you contacted any member of the School Board about your complaint?

Yes No

If yes, who did you contact and what was the outcome? _____

If no, why not? _____

Please Describe Your Complaint (attach additional pages as necessary): _____
