**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.
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: ________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

We transform the school experience