

Revised: 4/1/2019

NOTICE TO PARENTS/GUARDIANS, STUDENTS, AND TEACHERS: PRESCHOOL COMPLAINT RIGHTS

Parents/Guardians, Students, and Teachers:

Pursuant to Education Code ~~8235.5~~ **8212**, you are hereby notified that any California State Preschool Program that is exempt from licensure must have:

1. Outdoor shade that is safe and in good repair
2. Drinking water that is accessible and readily available throughout the day
3. Safe and sanitary restroom facilities with one toilet and handwashing fixture for every 15 children
4. Restroom facilities that are available only for preschoolers and kindergartners
5. Visual supervision of children at all times
6. Indoor and outdoor space that is properly contained or fenced and provides sufficient space for the number of children using the space at any given time
7. Playground equipment that is safe, in good repair, and age appropriate

If you choose to file a complaint alleging that any of the above conditions is not being met, your complaint will be addressed through the district's uniform complaint procedures as required by law. A complaint form may be obtained at the school office or district office, or downloaded from the school or district web site.

You may also download a copy of the California Department of Education complaint form *when available* from the following web site: <http://www.cde.ca.gov/re/cp/uc>. However, a complaint need not be filed using either the district's complaint form or the complaint form from the California Department of Education.

Community Relations
EXHIBIT (2 of 3) 1312.3: UNIFORM COMPLAINT PROCEDURES

Silver Valley Unified School District

Revised: 4/1/2019

**PRESCHOOL COMPLAINT FORM:
UNIFORM COMPLAINT PROCEDURES**

Education Code ~~8235.5~~ **8212** requires that the district's uniform complaint procedures be used for the filing of complaints concerning noncompliance with health and safety standards for license-exempt California State Preschool Programs. The complaint and response are public documents as provided by law. Complaints may be filed anonymously. However, if you wish to receive a response to your complaint, you must provide the contact information below.

Response requested? Yes No

Contact information (if response is requested):

Name: _____

Address: _____

Telephone/Day: _____ Telephone/Night: _____

E-mail Address: _____

Date problem was observed: _____

Location of the problem that is the subject of this complaint:

School Name/Address: _____

Room Number/Name of Room/Location of Facility: _____

Only the following issues may be the subject of this complaint process. If you wish to complain about an issue not specified below, please contact the school or district for the appropriate district complaint procedure.

Specific issue(s) of the complaint: (Please check all that apply. A complaint may contain more than one allegation.)

- The preschool does not have outdoor shade that is safe and in good repair
- Drinking water is not accessible and/or readily available throughout the day
- The preschool does not provide safe and sanitary restroom facilities with one toilet and handwashing fixture for every 15 children
- Restroom facilities are not available only for preschoolers and kindergartners
- The preschool program does not provide visual supervision of children at all times
- Indoor or outdoor space is not properly contained or fenced or does not provide sufficient space for the number of children using the space at any given time
- Playground equipment is not safe, in good repair, or age appropriate

Please describe the issue of your complaint in detail. You may attach additional pages and include as much text as necessary to fully describe the situation.

Please file this complaint at the following location:

(Preschool Administrator or Designee)

(Address)

Please provide a signature below. If you wish to remain anonymous, a signature is not required. However, all complaints, even anonymous ones, should be dated.

(Signature)

(Date)

Community Relations
EXHIBIT (3 of 3) 1312.3: UNIFORM COMPLAINT PROCEDURES

Silver Valley Unified School District

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Silver Valley Unified School District

P.O. Box 847, Yermo, CA 92398
760-254-2916
www.svusdk12.net

UNIFORM COMPLAINT FORM

(Reference Board Policy/Administrative Regulation 1312.3)

Submit Completed Form to:

Assistant Superintendent, Educational Services
35320 Daggett-Yermo Rd. Yermo, CA 92398
760-254-2916

COMPLAINANT'S CONTACT INFORMATION

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

You are filing this complaint on behalf of: _____

- Yourself Your child (a student) Another student Group

BASIS OF COMPLAINT (please check the applicable category/categories:

- DISCRIMINATION HARASSMENT INTIMIDATION BULLYING

For allegation(s) of noncompliance, please check the program or activity referred to in your complaint, if applicable:

- | | | |
|---|--|---|
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Consolidated Categorical Programs | <input type="checkbox"/> Nutrition Services |
| <input type="checkbox"/> Career/Technical Education | <input type="checkbox"/> Migrant and Indian Education | <input type="checkbox"/> Special Education |
| <input type="checkbox"/> Child Development Program | <input type="checkbox"/> Adoption of School Safety Plan | <input type="checkbox"/> Fees and Charges |

For allegation(s) of unlawful discrimination/harassment, please check the basis of the unlawful discrimination/harassment described in your complaint, if applicable:

- | | | |
|--|--|---|
| <input type="checkbox"/> Age | <input type="checkbox"/> Ethnicity | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Ancestry | <input type="checkbox"/> Gender* | <input type="checkbox"/> Sex (Title IX) |
| <input type="checkbox"/> Color | <input type="checkbox"/> National Origin | <input type="checkbox"/> Sexual Harassment |
| <input type="checkbox"/> Mental or Physical Disability | <input type="checkbox"/> Race | <input type="checkbox"/> Sexual Orientation |
| <input type="checkbox"/> Based on a person's association with a person or group with one or more of these actual or perceived characteristics. | | |

* According to State law, "Gender" includes a person's gender identity and gender related appearance and behavior whether or not stereotypically associated with the person's assigned sex at birth. (Education code section 210.7)

DETAILS OF COMPLAINT: Please answer the following questions to the best of your ability. Attach additional sheets of paper if you need more space.

1. Please describe, in as much detail as possible, the type of incident(s) you experienced that led to this complaint, including: the events or actions; the individuals involved; date(s) and time; location; and witnesses, if any:

2. What steps, if any, have you taken to resolve this issue before filing this complaint?

3. Describe any harm suffered as a result of the incident(s) described above.

4. Describe the proposed remedy that is being requested.

Signature of Person Filing Complaint

Date

Received by: _____

Title: _____

Date Received/Filed: _____

(Please provide a duplicate copy to the Complainant)