

Manchester Public Schools

45 North School Street
Manchester, Connecticut 06042

Section 504 Complaint Form (504/12)

(This form is intended to be used if an individual has a complaint under Section 504 alleging discrimination on the basis of a disability or in the identification, evaluation, or educational placement of a student).

Name of Complainant:		Date:	
Complainant Address:			
Telephone:		Alt. Number:	

Student Name:		Date of Birth:	
Student Address: (if different from complainant)			
School Attending:		Grade:	

Please describe the nature of your complaint:

Proposed resolution or corrective action you wish to see taken with regard to the stated issues:

Signature of Complainant:		Date:	
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Submit this form to the Director for Pupil Personnel Services
Manchester Public Schools, 45 North School Street, Manchester, CT 06042