

**REQUESTING ADMINISTRATIVE COMPLAINT INVESTIGATION**

(Be sure to keep a copy for your records)

(Date)

(Your Name)

(Your Address)

(Your Phone Number)

Louisiana Department of Education

P.O. Box 94064

Baton Rouge, LA 70804-9064

Fax: 225-342-1197

Attention: Legal Division

RE: (Student's Name)

(Student's Date of Birth)

(School and School District)

Dear Sir or Madam;

I would like to request an administrative complaint investigation because the school has violated special education laws. (Describe the situation. State the facts of your case.)

Sincerely,

(Your signature)

cc: Pyramid Community Parent Resource Center

(School Principal)

(School Superintendent)