Citizen Complaint Form Conventional Non-Public School

1. Give the fo	owing information relative to the complaint or concern:
a. County	which the school is located:
b. School	ame:
c. School'	Chief Administrator:
2. Complaint	r Concern information:
the scho or more governi school' compla of abus	X within each box to the left of each conventional non-public school law which you allege all has violated. NOTE: If the complaint or concern does not involve a violation of one of the following statutory requirements for conventional non-public schools, no ent agency can intervene. Those complaints or concerns must instead be directed to the board of directors which oversees the operation of the school. However, if your it or concern includes allegations (other than non-public school statutory related issues) or neglect of a child in the care and custody of any school or a particular household, tely notify your local DSS or local law enforcement agency.
□ Fa	ure to register the school with the NC Division of Non-Public Education (NC DNPE)
□ Fa	ure to operate on a regular schedule for at least nine calendar months each year.
□ Fa	ure to maintain student attendance and immunization records.
□ Fa	ure to meet state and local building, fire and sanitation code requirements.
	ure to administer annually a nationally standardized test to each student enrolled in grades , 9 & 11.
□ Fa	ure to enforce its grade 11 standardized test cut-off score for high school graduation.
□ Fa	ure to notify the NC DNPE when the school has been terminated.
3 Give a brie	concise explanation of the specific violation cited above in question 2a.
Attach add	ional sheets if necessary
permission to the labove home school	d submit this form (along with any attached information) to the above address. "I hereby grant orth Carolina Division of Non-Public Education to forward a copy of this complaint or concern to the chief administrator for a response. I acknowledge reading a copy of the Procedure for Handling accerns. I certify that the information I have provided is correct to the best of my knowledge."
Street Address _	City
State	Zip Telephone
Signature	Date
For Office Use ODate Received	nly Date Reviewed DNPE Director Initials