Mary Ellen Riccio

SEP 2 4 2011

## Connecticut State Department of Education - Bureau of Special Education Special Education Complaint Form

This is a recommended form for the filing of special education complaints. You do not have to use this form to file a complaint although it will help you to include the required information. (Questions may be directed to Bureau staff at 860-713-6921 or 860-713-6938.) Please complete this form and forward to the parents or school district (as appropriate) and send a copy to:

State Department of Education Bureau of Special Education P.O. Box 2219 – Room 359 Hartford, CT 06145-2219

Address:		Phone:
	(street)	
	Ct	
(town)	(state)	(zip)
Parent's Name (if different):_		Phone:
Child's Name		Date of Birth
(last)	(middle) (first)	
Education Agency (school dist	trict) Norwalk Public Schools	
Name of School the Child Atte	ends	Disability Category not eligible
		- J J
Child's Address:		
	(street) Ct.	
(town)	(state)	(zip)
and a proposed resolution of th	ne problem. Please forward a cop	s, the nature of the child's problem y of this complaint to the education s documentation of your complain
In September 17, 2014, a PPT	Meeting was held for	
*		m that meeting i shallid have
days since the PPT Meeting. eccived it in no more than five	I have not received the IEP from days after the PPT Meeting.  Schools to send me a copy of the	The proposed resolution to this
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