REQUEST FOR STATE COMPLAINT INVESTIGATION

(This form is not the form to use to file for a due process hearing)

Per federal regulations at 34 CFR 300.509, this form has been developed to assist parents and other parties in filing a State complaint. The use of this form is recommended, but not required. The completed form should be sent to the address, listed below, at the Illinois State Board of Education (ISBE). A copy of the form must also be forwarded to the child's local school district or to the public agency that is serving the child.

For more information about the complaint investigation process, or for assistance in completing this form, please contact our agency at 217-782-5589, or use our agency's toll-free number at 866-262-6663. More information about the complaint investigation process can also be found at http://www.isbe.net/spec-ed/html/complaint_investigation.htm.

SECTION 1

<table>
<thead>
<tr>
<th>To: Complaint Coordinator</th>
<th>You must also send a copy of this complaint to your local school district superintendent.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Education Services Division</td>
<td>To: West Aurora 129</td>
</tr>
<tr>
<td>Illinois State Board of Education</td>
<td>Name of School District</td>
</tr>
<tr>
<td>100 N. First Street</td>
<td></td>
</tr>
<tr>
<td>Springfield, IL 62777-0001</td>
<td>Date Sent: 9/24/2012</td>
</tr>
</tbody>
</table>

Date Sent: 9/24/2012

SECTION 2

COMPLAINANT INFORMATION (Please Print or Type)

<table>
<thead>
<tr>
<th>Name:</th>
<th>Phone Number:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Email Address (Optional):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Relationship to Student:</th>
<th>Parent/Guardian</th>
<th>Advocate</th>
<th>Attorney</th>
<th>Other (Explain)</th>
</tr>
</thead>
</table>

Consent is Attached (see note below): Yes No NA

Note: Complaints regarding a specific child lodged by an individual other than the parent/guardian must be accompanied by a letter of consent from the parent/guardian in order for ISBE to share information with the complainant regarding the results of the complaint investigation. Likewise, if an individual files a complaint on behalf of a student who is eighteen (18) years of age or older, it must be accompanied by a letter of consent from the student in order for ISBE to share information with the complainant regarding the results of the complaint investigation.
SECTION 3

STUDENT INFORMATION (Please Print or Type)

Name: __________________________ Phone Number: __________________________
Address: __________________________
SIS ID (if known) __________________________ Gender: _______ Race/Ethnicity: ________________
Birthdate: ________________ Grade: __________ Eligibility Category: ________________
Is the Child Currently Enrolled in School? _______ Yes _______ No
Name of School District: West Aurora 129 _______ Name of School: West Aurora High

SECTION 4

COMPLAINT INFORMATION

Your complaint must allege a violation of a special education law, rule, or regulation contained in the Individuals with Disabilities Education Act (IDEA) or its implementing regulations, Article 14 of the Illinois School Code, or Title 23 of the Illinois Administrative Code. The violation that is alleged must have occurred not more than one year prior to the date the complaint is received by ISBE, and can involve an individual student or group of students.

A. Date of alleged violation: 08 - 09 of 2012

B. Description of the Alleged Violation(s) and Supporting Facts (Attach additional pages if necessary)
   See Attachments.

C. Description of the Resolution or Action you are Seeking (Attach additional pages if necessary)

   Note: The proposed resolution will be taken into consideration. However, the final resolution of the complaint will be determined by the Illinois State Board of Education. School District will be sanctioned for violations. Appropriate education, placement, and IEP provided to ________________ in a timely manner.
D. Please list school officials you have contacted regarding these issues:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joe Pacetti</td>
<td>Assistant Special Education Admin</td>
</tr>
<tr>
<td>Snell, Pam</td>
<td>Vocational Coordinator</td>
</tr>
<tr>
<td>Siekierski, Mark</td>
<td>Special Education Administrator</td>
</tr>
</tbody>
</table>

Signature of Person Filing Complaint (Required)  

Date  

CHECKLIST

(Before mailing your request, please make sure that the items below have been completed.)

- [ ] You have provided a copy of your complaint to the school district (Section 1).
- [ ] You have provided your name, address, and contact information where you can be reached (Section 2).
- [ ] You have provided the student’s name, contact information, and name of the school district and school the student attends (Section 3).
- [ ] You have mailed your complaint to ensure that ISBE receives the complaint no later than ONE YEAR from the occurrence of the alleged violation (Section 4).
- [ ] You have provided detailed information as to when, where, and how the alleged violation took place (Section 4).
- [ ] You have provided a proposed solution to the problem (Section 4).
- [ ] You have signed the complaint (Section 4).
Independent Evaluation has been requested: Independent Educational Evaluation:
Section 226.180 Independent Educational Evaluation and (105 ILCS
5/14-8.02) (from Ch. 122, par. 14-8.02)

*No forms, information, or response have been forthcoming to parents. Evaluation was first requested at a meeting on August 31, 2012, and reminder of request sent in writing via e-mail to Mark Siekierski on September 08, 2012
To the maximum extent appropriate, the placement shall provide the child with the opportunity to be educated with children who are not disabled; provided that children with disabilities who are recommended to be placed into regular education classrooms are provided with supplementary services to assist the children with disabilities to benefit from the regular classroom instruction and are included on the teacher's regular education class register. Subject to the limitation of the preceding sentence, placement in special classes, separate schools or other removal of the disabled child from the regular educational environment shall occur only when the nature of the severity of the disability is such that education in the regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. The placement of limited English proficiency students with disabilities shall be in non-restrictive environments which provide for integration with non-disabled peers in bilingual classrooms. Annually, each January, school districts shall report data on students from non-English speaking backgrounds receiving special education and related services in public and private facilities as prescribed in Section 2-3.30. If there is a disagreement between parties involved regarding the special education placement of any child, either in-state or out-of-state, the placement is subject to impartial due process procedures described in Article 10 of the Rules and Regulations to Govern the Administration and Operation of Special Education.

*According to current IEP "All" instruction is to take place within a Special Education Self-Contained Room. This is counter-productive to social development.
To ensure that a parent can participate fully and effectively with school personnel in the development of appropriate educational and related services for his or her child, the parent, an independent educational evaluator, or a qualified professional retained by or on behalf of a parent or child must be afforded reasonable access to educational facilities, personnel, classrooms, and buildings and to the child as provided in this subsection (g-5). The requirements of this subsection (g-5) apply to any public school facility, building, or program and to any facility, building, or program supported in whole or in part by public funds. Prior to visiting a school, school building, or school facility, the parent, independent educational evaluator, or qualified professional may be required by the school district to inform the building principal or supervisor in writing of the proposed visit, the purpose of the visit, and the approximate duration of the visit. The visitor and the school district shall arrange the visit or visits at times that are mutually agreeable. Visitors shall comply with school safety, security, and visitation policies at all times. School district visitation policies must not conflict with this subsection (g-5). Visitors shall be required to comply with the requirements of applicable privacy laws, including those laws protecting the confidentiality of education records such as the federal Family Educational Rights and Privacy Act and the Illinois School Student Records Act. The visitor shall not disrupt the educational process.

*Parent have repeatedly requested scheduling for [redacted] day. Program was not available when IEP was completed, and NO specific schedule for [redacted] day has been provided.
In the development of the individualized education program for a student who has a disability on the autism spectrum (which includes autistic disorder, Asperger's disorder, pervasive developmental disorder not otherwise specified, childhood disintegrative disorder, and Rett Syndrome, as defined in the Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV, 2000)), the IEP team shall consider all of the following factors:

(1) The verbal and nonverbal communication needs of the child.
(2) The need to develop social interaction skills and proficiencies.
(3) The needs resulting from the child's unusual responses to sensory experiences.
(4) The needs resulting from resistance to environmental change or change in daily routines.
(5) The needs resulting from engagement in repetitive activities and stereotyped movements.
(6) The need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder.
(7) Other needs resulting from the child's disability that impact progress in the general curriculum, including social and emotional development.

*The Autism Consideration Worksheet provided to parents is both inaccurate and vague. The original attached to current IEP was signed by Shelley Cochran who is no longer with the district, and when documentation in the form of observation dates, and notes was requested, parents were told that they were unavailable. Mark Siekierski then sent an amended Autism Evaluation worksheet via e-mail removing Ms. Cochran's name and changing the information without further observation of the autistic individual and documentation. This information is without, accuracy and documentation. The form was filled out ONLY to satisfy the laws requirements and does NOT benefit the autistic individual in the IEP.*
September, 23, 2012

Illinois State Board of Education
Special Education Services Division - Springfield
100 North First Street
Springfield, IL 62777-0001

Dear Illinois State Board of Education,

I am contacting you with a formal complaint regarding [redacted]'s transition during the period of August and September 2012. This letter will serve as consent for the ISBE to share information with the complainant regarding the results of the complaint investigation as required.

Sincerely yours,