RE: AEDY Complaint Form

Dear Parent/Guardian:

Thank you for contacting the **Blacklick Valley School District** and providing us with the opportunity to assist you in this matter. The following is a process designed to address complaints and concerns regarding any aspect of Alternative Education for Disruptive Youth (AEDY) programs, including placement and exiting decisions, the quality of academic instruction, the provision or omission of language assistance services, and services to students with disabilities to include reasonable modifications.

Individuals having complaints and concerns regarding AEDY are required to seek resolution via the relevant AEDY Program and LEA rather than elevating concerns to PDE in the first instance. Information on the complaint process will be provided to students and parents at the Initial hearing for placement to the AEDY program. This form will also be available on our website at WWW.BVSD.K12.PA.US

**Filing an AEDY Complaint with the LEA and AEDY Program**

Any individual or organization may submit a written complaint using the attached AEDY Complaint Form. The form must be completed and sent to the relevant AEDY Program and LEA.

The complaint must include:

1. the facts on which the statement is based;
2. all relevant documents and supporting information;
3. a proposed resolution to the problem to the extent known and available to the complainant at the time the complaint is filed; and
4. the contact information for the complainant. The complainant may provide additional information either orally or in writing at any time during the complaint process. The complainant must provide the preferred method of contact on the AEDY Complaint Form.

All relevant documents must be forwarded to the LEA Program and AEDY programs

Blacklick Valley Jr. Sr. High School (LEA) Alternative Community Resource Program Inc (AEDY)

Dr. Laura Fisanick Kim Micik

555 Birch Street 317 Power Street

Nanty-Glo, PA 15943 Johnstown, PA 15906

Phone: 814-749-9211 Phone: 814-361-2414

Fax: 814-749-8627 Fax: 814-361-2414

Email: Laura.Fisanick@bvvikings.org Email: KMicik@acrpkids.org

Failure to provide all of the information in the Complaint Form will not result in the complaint being dismissed. AEDY Programs will work with complainants to ensure that the requested information is as complete as possible.

The Staff Member in charge of this process may interview any individual who is said to have knowledge of the allegations. As part of the investigation, the Staff Member may require the AEDY Program and LEA to respond to the allegations and may contact the complainant. The Staff Member may consider any relevant evidence as part of the investigation and outcome.

If the Staff Member concludes an investigation and makes a finding of compliance, the Staff Member will notify the complainant and the relevant AEDY Program and LEA and take no further action. If the complainant is not satisfied with the decision, the Staff Member may provide the PDE Complaint Process information to the complainant. If the Staff Member concludes an investigation and makes a finding of non-compliance, the Staff Member will notify the complainant, the relevant AEDY Program and LEA as applicable and direct corrective action to address the noncompliance.

The Staff Member will make a good faith effort to perform the actions outlined above in accordance with the following timeline: (1) investigate within 45 days of a determination that an investigation is appropriate, and (2) determine compliance or noncompliance within 30 days of the conclusion of an investigation. Depending upon the nature of the allegations and the investigation, the Staff Member may take additional time for these steps and will notify the complainant if additional time is needed.

The Staff Member will review the actions taken to address any noncompliance within one year of the date the corrective action was directed. If the Staff Member determines that the AEDY Program and LEA addressed the noncompliance, the matter will be closed. If the Staff Member determines that the AEDY Program and LEA failed to address the noncompliance, the Staff Member will report to an AEDY Program and LEA Administrator for appropriate enforcement action.

Subject to the availability of AEDY Program and LEA resources and the number and nature of complaints received on any given date, the Staff Member will acknowledge receipt of complaints. To determine the status of a complaint, please feel free to contact Dr. Laura Fisanick and Kim Micik.

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**Alternative Education for Disruptive Youth (AEDY)**

 **Complaint Form**

You may make copies of this form, use additional paper, or call/email for additional copies the AEDY Program and LEA.

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My preferred method of contact is:

 ☐ By phone (please provide number):

 Best time during normal business hours to call:

 ☐ By email (please provide email address):

 ☐ In person at a public facility during normal business hours. The location would probably be a school or Intermediate Unit building to permit duplication of documents.

Are you filing this complaint on behalf of a specific child? ☐ Yes ☐ No

Please provide your contact information and relationship to child.

Name:

Address:

Phone Numbers -Home: Work: Cell:

E-mail:

Relationship to child or children:

 ☐ Parent ☐ Attorney ☐ Advocate ☐ Other

Name and address of the residence of the child:

**Contact Information**

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Child’s school and school district:

Is the child currently in school? ☐ Yes ☐ No

If so, where is the child’s current program:

School Building:

School District:

Charter School:

Private Provider:

Complete *only* if the complaint is filed on behalf of a homeless child or youth.

Contact Person:

Telephone:

On or about what date did the violation occur?

Date:

To clarify my allegations, I would like the **LEA and AEDY Program** to interview the following person(s). (Optional)

|  |  |  |
| --- | --- | --- |
| Name  | Occupation/Title  | Phone Number/E-Mail Address  |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |

Provide a statement about the violation or issue, which you believe has occurred. Please include a description of the problem.

List the facts that support your statement.

What is your proposed solution to this problem?

Please return the form to the **LEA and AEDY Program Office**

**Contact Information**

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