



IVY PREPARATORY ACADEMY

Public Charter Schools of Excellence

Complaint Form for Federal Programs under the No Child Left Behind Act of 2001

Please Print

Name of Complainant:	
Mailing Address:	
Primary Phone Number:	Secondary Phone Number:
Person/Department the Complaint is against:	
Statement describing the federal requirement that Ivy Preparatory Academy has violated or the regulation that applies to an applicable program. Please include the citation to the Federal statute or regulation. Attach additional pages if needed.	
Please describe the facts on which the statement is based and the specific requirement allegedly violated. Attach additional sheets as needed.	
Please list the name, telephone number and/or email address of individuals who may be able	



IVY PREPARATORY ACADEMY

Public Charter Schools of Excellence

to provide additional information.

Please attach/enclose copies of all applicable documents supporting your position.

Signature of Complainant(s)

Date

Mail or Deliver all correspondence to:

Attention Executive Director
Ivy Preparatory Academy
1807 Memorial Drive
Atlanta, GA 30317

Office Use Only

Date Complaint Received:

Date Investigation Began:

Date of Response to Complainant