

**Citizen Complaint Form**  
***Conventional Non-Public School***

1. Give the following information relative to the complaint or concern:

a. County in which the school is located: \_\_\_\_\_

b. School Name: \_\_\_\_\_

c. School's Chief Administrator: \_\_\_\_\_

d. Place an X within each box to the left of each conventional non-public school law which you allege the school has violated. **NOTE: *If the complaint or concern does not involve a violation of one or more of the following statutory requirements for conventional non-public schools, no government agency can intervene. Those complaints or concerns must instead be then directed to the school's board of directors which oversees the operation of the school. However, if your complaint or concern includes allegations (other than non-public school statutory related issues) of abuse or neglect of a child in the care and custody of any school or a particular household, immediately notify your local DSS or local law enforcement agency.***

- Failure to register the school with the NC Division of Non-Public Education (NC DNPE)
- Failure to operate on a regular schedule for at least nine calendar months each year
- Failure to maintain student attendance and immunization records
- Failure to meet state and local building, fire and sanitation code requirements
- Failure to administer annually a nationally standardized test to each student enrolled in grades 3, 6, 9 & 11
- Failure to enforce its grade 11 standardized test cut-off score for high school graduation
- Failure to notify the NC DNPE when the school has been terminated

2.. Give a brief, concise explanation of the specific violation cited above in question 1d. Attach additional sheets if necessary. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Complete, sign and submit this form (along with any attached information) to the above address.

I hereby grant permission to the North Carolina Division of Non-Public Education to forward a copy of this complaint or concern to the conventional non-public school's chief administrator for a response. I acknowledge reading a copy of the Procedure for Handling Complaints and Concerns. I certify that the information I have provided is correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_ ( \_\_\_\_\_ ) \_\_\_\_\_