



SOUTHERN CALIFORNIA
REGIONAL
OCCUPATIONAL
CENTER

UNIFORM COMPLAINT FORM

OFFICIAL USE ONLY
Issue #:
Date Issued:
Time:
Signature of Administrator:

A complaint under the Uniform Complaint Procedures (UCP) is a written and signed statement alleging a violation of federal or state laws governing certain educational programs. Southern California Regional Occupational Center has the primary responsibility to ensure compliance with applicable state and federal laws and regulations governing these educational programs. As always, the Center's Governing Board encourages early resolution of complaints whenever possible. However, to resolve complaints which may require a more formal process, the Board adopted the uniform system of complaint processes specified in Title 5 of the California Code of Regulations sections 4600-4694, as applicable, and Board Policy (BP) and Administrative Regulation (AR) 1312.3. The Center designates UCP compliance officer(s) who receive and coordinate the investigation of complaints and ensure Center compliance with the law. UCP complaints should be submitted by mail or email to:

Compliance Officers:

Director of Programs & Student Support Services
Southern California Regional Occupational Center
2300 Crenshaw Blvd.
Torrance, CA 90501
(310) 224-4200, Ext. 210
drmontoya@scroc.k12.ca.us

Assistant Superintendent
Southern California Regional Occupational Center
2300 Crenshaw Blvd.
Torrance, CA 90501
(310) 224-4200, Ext. 216
drhelair@scroc.k12.ca.us

Director of Human Resources
Southern California Regional Occupational Center
2300 Crenshaw Blvd.
Torrance, CA 90501
(310) 224-4200, Ext. 328
llarson@scroc.k12.ca.us



If you are unable to put your complaint in writing, due to conditions such as a disability or illiteracy, the District will assist you with filing the complaint. Complaints may be filed anonymously, and will be investigated if sufficient information is provided.

Name: _____

Address: _____

Phone Number: _____ Email address: _____

Role: Parent/Guardian Employee Student Other

A complaint filed on behalf of a student may only be filed by that student or that student's duly authorized representative.

COMPLAINT

Date(s) of Alleged Violation(s): _____

School/Dept. of Alleged Violation(s): _____

Basis for Complaint (select all that apply):


- School safety plans
- Sexual Harassment (BP 5147.7)
- Discrimination, including harassment, intimidation, or bullying, on the basis of (select all that apply):
 - Race
 - Ethnicity
 - Color
 - Ancestry
 - Gender expression
 - Ethnic group identification
 - Association with person/group with one or more of these actual or perceived characteristics
 - National origin
 - Age
 - Religion
 - Marital status
 - Sexual orientation
 - Physical or mental disability
 - Sex
 - Gender
 - Gender identity
 - Parental status
 - Genes
- Pregnant or parenting student
- Classroom

DESCRIPTION OF COMPLAINT



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Please describe your complaint in detail, including the date(s), name(s) of people involved in the complaint, and the results of any previous meetings or discussions with the site or personnel regarding the complaint. You may attach additional pages as necessary to fully describe your complaint.

 _____ I understand that the site administrator, Superintendent or designee, or Board may request from me further information about this complaint and, if such information is available, I shall present it upon request.

I, _____ hereby certify that the above statements are true and correct to the best of my knowledge.

Signature: _____

Date: _____