

Legal Division
Montana Office of Public Instruction
P.O. Box 202501
Helena, MT 59620
Phone: (406) 444-4402

COMPLAINT FORM
All Fields Required

I. Complainant Information (You are the Complainant)

- a. Name: _____
- b. Address: _____
- c. City/State/ZIP: _____
- d. Phone Number: _____

II. Licensee Information (Teacher, Principal, Superintendent, etc.)

NOTE: if concerns relate to more than one licensee, please complete separate forms for each licensee

- a. Name: _____
- b. Position: _____
- c. Employing School: _____
- d. Employing District: _____

III. Statement of Facts

- a. Please review [§ 20-4-110\(1\)](#) of the Montana Code Annotated and indicate which subsection or subsections you believe the educator has violated.

- b. Please describe in your own words all the facts that led you to file this complaint. Include as much detail as possible, including dates, times, and other individuals involved. You are not limited to the space provided; feel free to attach additional pages, preferably typewritten, in order to fully explain the circumstances to the best of your ability. Please also enclose any supporting materials, such as pictures, text messages, e-mails, Facebook posts, newspaper articles, videos, etc.

- c. Please describe what efforts have been taken to resolve this at the local school district level and what the results of those efforts were. Examples of these efforts might include meeting with the licensee, meeting with administrators, and/or meeting with the local school board. If no effort has been taken to address this at the local level, please explain why that is the case. Note that the Office of Public Instruction will contact the local school district involved as part of its investigation of this complaint.

IV. Additional Witnesses

Please provide names and contact information of other individuals who you believe have information about the allegation(s) described above. Again, please do not feel limited to the space provided. If you do not know of anyone else, please write "N/A" below.

V. Oath or Affirmation

Please read and then sign the following statement:

1. I understand that filing a complaint with the Office of Public Instruction is a serious matter and that accusations against educators can permanently impact their personal and professional lives.
2. I understand that filing this complaint may lead to administrative proceedings and it is my intention to fully cooperate with the staff at the Office of Public Instruction in the investigation of this matter.
3. I understand I may be asked to testify, if needed, before a hearing panel and/or any other judicial body necessary to resolve this case.
4. I understand that my failure to fully cooperate could result in dismissal of this complaint.
5. I understand that my name, as well as other information I provide to the Office of Public Instruction, may be released to the licensee in question and/or the licensee's attorney during this review.
6. I declare under penalty of perjury and under the laws of the state of Montana that the foregoing, and the information I may have provided to supplement this form, is true and correct.

Complainant's Signature: _____

Date: _____

Location: _____