

West Virginia Citizens' Conflict Resolution Process

Level 1: Initial Claim Form

The West Virginia Board of Education (WVBE) has established a process for citizens to work with local education officials (such as principals and superintendents) to report and resolve problems within schools or county school systems related to their legal duties. When citizens believe there has been a violation of state law or the policies, rules, and regulations of the WVBE, the first step in the process is to meet with the local principal or designee (Level 1 administrator) to discuss the issue. WVBE policies may be reviewed at <http://wvde.state.wv.us/policies/>. The West Virginia Code may be reviewed at <http://www.legis.state.wv.us/WVCODE/Code.cfm>.

Please note that this process is not to be used in situations where the county does not have the authority to act or where there is another solution specifically provided by law (such as with the placement of exceptional students). It is also not to be used for personal complaints about school or county employees.

Use this form to provide as much information as possible about the issue or violation you have observed. When complete, you (and any other citizens who are joining you in this claim) must sign and date the form and file it with the principal at your local school. He/she or a designee (Level 1 administrator) will then schedule an informal conference with you to talk about the claim and try to find an appropriate resolution.

Citizen(s) Filing the Claim		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Primary Phone Number:	Alternate Phone Number:	Best Hours to Call:
Email Address:	Best Method of Reaching You (select one): <input type="checkbox"/> Phone (at the times above) <input type="checkbox"/> Email	
What best describes your role? <input type="checkbox"/> Citizen <input type="checkbox"/> Student <input type="checkbox"/> Parent/guardian of a student <input type="checkbox"/> Educator or other school staff* <input type="checkbox"/> Other relative of a student <input type="checkbox"/> Other: _____		
<i>* If you have a reasonable expectation of need for protection from retribution or retaliation, please contact your Level 2 administrator pursuant to Policy 4373, Chapter 5, Section 3.</i>		
Please use the "Additional Citizen(s) Joining the Claim" sheet to list the names and contact information for all other claimants. You will be the primary contact for the Level 1 administrator as he/she works with you to resolve this issue. Please remember to share all information about conference dates and times with your fellow citizen claimants.		
Basic Information About Your Claim		
Please provide information that best describes the institutions and/or individuals involved in your claim; dates on which the incident(s) occurred; and specific laws, policies, or rules involved. You will have an opportunity to provide detailed information on the next page.		
Party Causing the Violation: <input type="checkbox"/> Individual Person/Staff Member <input type="checkbox"/> School <input type="checkbox"/> County		
Name of School: _____ Name of County: _____ Name(s) of Individual(s): _____		
Date(s) of Incident(s): _____ <i>You may list the date you first became aware of the incident or violation.</i>		

State Laws or WVBE Policies, Rules, or Regulations of Concern to this Claim:

Please list, by code number or title or by policy name or number, the specific law(s) or regulation(s) you believe have been violated.

Details About Your Claim

Please provide a **detailed** description of the incident(s) or action(s) for which you are filing this claim. Include information describing what, who, when, where, how, and why. You may attach additional pages or evidence as needed.

How has this incident affected you, your child, other students, the school, the county school system, or others?

To the best of your knowledge, what steps or actions, if any, have been taken to remedy this issue?

Are there any witnesses or others with direct, first-hand knowledge about this incident?

☐ Yes

☐ No

If "Yes," please provide name(s) and contact information:

Resolution of the Issue

How do you believe the issue(s) could be adequately addressed, resolved, or corrected?

Confidentiality

The filing of a Citizens' Conflict Resolution Claim, the identity of subjects and witnesses and any action taken as a result of such claim shall be confidential. Only those individuals necessary for the investigation and resolution of your claim shall be given information about it.

Please note that the Family Educational Rights and Privacy Act (FERPA) does not permit disclosure of the final results of any disciplinary proceeding against a student who may be the subject of a Conflict Resolution Claim.

Your Signature

By signing this form, I certify that the information is true and accurate to the best of my information, knowledge, and belief.

Signature

Date

Notices

Please keep a copy of this form, complete with signature(s), and any supporting documents for your records.

The WVBE and the West Virginia Department of Education do not discriminate on the basis of sex, race, color, religion, disability, age and national origin in employment and in administration of any of their education programs and activities.

Additional Citizen(s) Joining the Claim		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Phone Number:	Email Address:	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> Signature Date </div>		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Phone Number:	Email Address:	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> Signature Date </div>		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Phone Number:	Email Address:	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> Signature Date </div>		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Phone Number:	Email Address:	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> Signature Date </div>		

Please attach additional sheets as necessary. Any citizen joining a claim must provide, at a minimum, his/her name, address, and signature to accompany the initial filing.

Signatures represent claimants' certification that information provided on this form is true and accurate to the best of their information, knowledge, and belief.

West Virginia Citizens' Conflict Resolution Process

Level 2: County Superintendent Claim Form

The West Virginia Board of Education (WVBE) has established a process for citizens to work with local education officials (such as principals and superintendents) to report and resolve problems within schools or county school systems related their legal duties. When citizens have submitted a Level 1 Claim but are not satisfied that the discussion and decision at that level are sufficient to address the problem, the next step in the process is to file a request for a conference or hearing with the county superintendent or designee (Level 2 administrator).

Please use this form to provide information about claim, including background documents and reasons you believe the Level 1 decision is not adequate. When complete, you (and any other citizens who are part of this claim) must sign and date the form and file it with the county superintendent. The Level 2 administrator will then schedule the conference or hearing, per your request, to try to find an appropriate resolution.

Citizen(s) Filing the Claim		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Primary Phone Number:	Alternate Phone Number:	Best Hours to Call:
Email Address:	Best Method of Reaching You (select one): <input type="checkbox"/> Phone (at the times above) <input type="checkbox"/> Email	
Please use the "Additional Citizen(s) Joining the Appeal" sheet to list the names and contact information for all other Level 1 claimants joining you in this appeal. You will be the primary contact for the Level 2 administrator as he/she works with you to resolve this issue. Please remember to share all information about conference/hearing dates and times with your fellow citizen claimants.		
Background Information About Your Claim		
Please provide a brief description of the substantive issues in your initial claim (that is, the major reason you filed the claim). Attach a copy of your initial claim form, any evidence you included, and the Level 1 decision.		
State Laws or WVBE Policies, Rules, or Regulations of Concern to the Initial Claim: <i>Please list, by code number or title or by policy name or number, the specific regulation(s) you believe have been violated.</i>		
Requested Meeting: Conference or Hearing		
At this level, you have the option to request either a conference or a hearing with the Level 2 administrator. A conference is a meeting with the Level 2 administrator conducted in a manner similar to a Level 1 conference. A hearing is a more formal meeting, with testimony from you, other witnesses and staff members presented under oath. Hearings will be recorded, and a transcript of the proceedings will be produced; conferences will not be recorded. Please indicate which type of meeting you are requesting by selecting one below.		
<input type="checkbox"/> Conference: I request a conference with the Level 2 administrator to discuss the claim and appeal.		
<input type="checkbox"/> Hearing: I request a hearing with the Level 2 administrator to review this issue formally and under oath.		

Reason for Appeal	
Please describe the reason(s) you are appealing the Level 1 decision. As appropriate, include a description of the reason(s) why you believe the decision is not sufficient to address the issue(s) presented in your claim. You may attach additional evidence not included in your Level 1 claim that you believe is relevant.	
Resolution of the Issue	
How do you believe the issue(s) could be adequately addressed, resolved, or corrected?	
Confidentiality Terms	
<p>The filing of a Citizens' Conflict Resolution Claim, the identity of subjects and witnesses and any action taken as a result of such claim shall be confidential. Only those individuals necessary for the investigation and resolution of your claim shall be given information about it.</p> <p>Please note that the Family Educational Rights and Privacy Act (FERPA) does not permit disclosure of the final results of any disciplinary proceeding against a student who may be the subject of a Conflict Resolution Claim.</p>	
Your Signature	
By signing this form, I certify that the information is true and accurate to the best of my information, knowledge, and belief.	
_____	_____
Signature	Date
Notices	
<p>You must file this form with your county superintendent within 15 days of receiving the Level 1 decision. Your conference or hearing should be conducted within 15 days of the superintendent's receipt of your form. The Level 2 administrator will render a written decision within 15 days following a conference or 25 days following a hearing.</p> <p>Please keep a copy of this form, complete with signature(s), and any supporting documents for your records.</p> <p><i>The WVBE and the West Virginia Department of Education do not discriminate on the basis of sex, race, color, religion, disability, age and national origin in employment and in administration of any of their education programs and activities.</i></p>	

The Citizens' Conflict Resolution Process is to be used when a citizen believes a school or county school system has violated state law or the policies, rules, and regulations of the WVBE. The process is not to be used in situations where the county does not have the authority to act or where there is another solution specifically provided by law (such as with the placement of exceptional students). It is also not to be used for personal complaints about school or county school system employees.

Additional Citizen(s) Joining the Appeal		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Phone Number:	Email Address:	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> Signature Date </div>		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Phone Number:	Email Address:	
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Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Phone Number:	Email Address:	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> Signature Date </div>		

Please attach additional sheets as necessary. Any citizen joining a claim or appeal must provide, at a minimum, his/her name, address, and signature to accompany the initial filing. Signatures are claimants' certification that information provided on this form is true and accurate to the best of their information, knowledge, and belief.

West Virginia Citizens' Conflict Resolution Process

Level 3: State Superintendent Review Form

The West Virginia Board of Education (WVBE) has established a process for citizens to work with local education officials (such as principals and superintendents) to report and resolve problems within schools or districts related their legal duties. When citizens have submitted both a Level 1 Claim and a Level 2 Claim but are still not satisfied that the decisions at those levels are sufficient to address the problem, the final step in the process is to request a review by the State Superintendent at the West Virginia Department of Education (WVDE) or his/her designee (Level 3 administrator).

Please use this form to provide information about your request, including reasons you believe the Level 2 decision is not adequate. You **must include copies** of the Level 1 and Level 2 decisions any supporting documents (such as your Level 1 claim form and Level 2 appeal form along with any records or evidence you provided at those levels). If you requested a hearing for your Level 2 appeal, you should request that the Level 3 administrator forward a copy of the transcript to the State Superintendent's office. When you have completed the form and compiled the documentation, you (and any other citizens who are part of this claim) must sign and date the form and file it with the State Superintendent.

When the Level 3 administrator has received all of the relevant documents, he or she will review your claim and conduct any additional inquiry that may be needed and/or helpful. The decision rendered by the Level 3 administrator shall be **final**.

Citizen(s) Filing the Claim		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Primary Phone Number:	Alternate Phone Number:	Best Hours to Call:
Email Address:	Best Method of Reaching You (select one): <input type="checkbox"/> Phone (at the times above) <input type="checkbox"/> Email	
Please use the "Additional Citizen(s) Joining the Request" sheet to list the names and contact information for all other Level 1 claimants joining you in this request. You will be the primary contact for the Level 3 administrator throughout the review of this issue. Please remember to share all pertinent information with your fellow citizen claimants.		
Background Information About Your Claim and Appeal		
Please provide a brief description of the substantive issues in your initial claim and your subsequent appeal (that is, the major reason(s) you filed the claim and the appeal). Attach a copies of your Level 1 claim and Level 2 appeal forms, any evidence you included, and the Level 1 and Level 2 decisions. If a Level 2 hearing was held, request that a copy of the transcript be forwarded to the Level 3 administrator.		
State Laws or WVBE Policies, Rules, or Regulations of Concern to the Initial Claim: <i>Please list, by code number or title or by policy name or number, the specific regulation(s) you believe have been violated.</i>		

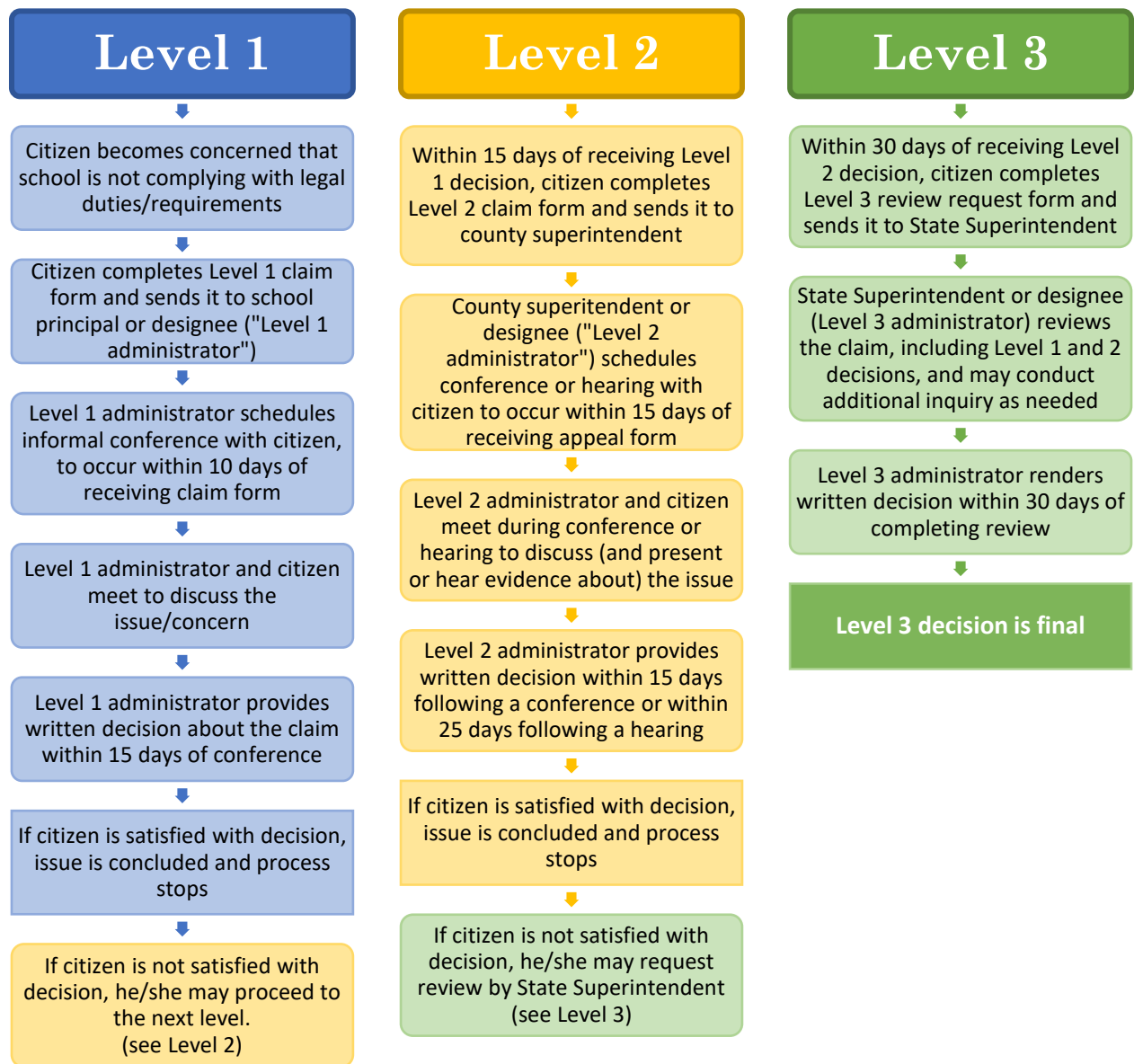
Reason for Requesting Review	
Please describe the reason(s) you are requesting a review by the State Superintendent. As appropriate, include a description of the reason(s) why you believe the decisions at Level 1 and Level 2 are not sufficient to address the issue(s) presented in your claim. You may attach additional evidence that you believe is relevant.	
Resolution of the Issue	
How do you believe the issue(s) could be adequately addressed, resolved, or corrected?	
Confidentiality Terms	
<p>The filing of a Citizens' Conflict Resolution Claim, the identity of subjects and witnesses and any action taken as a result of such claim shall be confidential. Only those individuals necessary for the investigation and resolution of your claim shall be given information about it.</p> <p>Please note that the Family Educational Rights and Privacy Act (FERPA) does not permit disclosure of the final results of any disciplinary proceeding against a student who may be the subject of a Conflict Resolution Claim.</p>	
Your Signature	
By signing this form, I certify that the information is true and accurate to the best of my information, knowledge, and belief. I further certify that I understand that the decision rendered by the State Superintendent (or designee) is final.	
_____	_____
Signature	Date
Notices	
<p>You must file this request with the State Superintendent of Schools within 30 days of receiving the Level 2 decision. The Level 3 administrator will render a written decision within 30 days of completing his/her review. The time required to complete a review will vary based on the complexities of the claim.</p> <p>Decisions rendered at Level 3 are final. There are no further steps in the West Virginia Citizens' Conflict Resolution Process.</p> <p>You may choose to keep a copy of this form, complete with signature(s), and any supporting documents for your own records.</p> <p><i>The WVBE and the West Virginia Department of Education do not discriminate on the basis of sex, race, color, religion, disability, age and national origin in employment and in administration of any of their education programs and activities.</i></p>	

The Citizens' Conflict Resolution Process is to be used when a citizen believes a school or district has violated state law or the policies, rules, and regulations of the WVBE. The process is not to be used in situations where the district does not have the authority to act or where there is another solution specifically provided by law (such as with the placement of exceptional students). It is also not to be used for personal complaints about school or district employees.

Additional Citizen(s) Joining the Request		
Last Name:	First Name:	Middle Initial:
Address:	City/State:	Zip Code:
Phone Number:	Email Address:	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> Signature Date </div>		
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Phone Number:	Email Address:	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> Signature Date </div>		

*Please attach additional sheets as necessary. Any citizen joining a claim or appeal must provide, at a minimum, his/her name, address, and signature to accompany the initial filing. Signatures represent claimants' certification that information provided on this form is true and accurate to the best of their information, knowledge, and belief and that **they understand Level 3 decisions are final.***

West Virginia Citizens' Conflict Resolution Process



The Citizens' Conflict Resolution Process is to be used when a citizen believes a school or county school system has violated state law or the policies, rules, and regulations of the WVBE. The process is not to be used in situations where the county does not have the authority to act or where there is another solution specifically provided by law (such as with the placement of exceptional students). It is also not to be used for personal complaints about school or county employees. Personal complaints about employees and other citizen complaints not governed by this process must be filed pursuant to the county school system's specific procedures.