



# UTOPIAN

ACADEMY FOR THE ARTS

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CHARTER SCHOOL NETWORK

## Complaint Form for Federal Programs under the Every Student Succeeds Act

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 Utopian Academy of the Arts has violated or the regulation that applies to an applicable program. <b><i>Please include the citation to the Federal statute or regulation.</i></b> 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.	



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Please list the name, telephone number and/or email address of individuals who may be able 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:**



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**Attention Executive Director**

Utopian Academy of the Arts  
2750 Forest Parkway  
Ellenwood, GA 30294

Office Use Only

Date Complaint Received:	Date Investigation Began:
Date of Response to Complainant	