

Denver Public Schools
SECTION 504 DISCRIMINATION/GRIEVANCE FILING FORM

TO: Denver Public Schools
Division of Student Services
John Liberatore
1860 Lincoln Street
Denver, CO. 80203

From: _____
Parent(s) Name

Address

City, State Zip

Phone Number(s)

Please check whether you will be represented by an attorney or assisted by an advocate.

_____ Attorney _____ Advocate

Name of Attorney or Advocate

Address

City, State Zip

Phone Number(s)

Fax Number

I/we are requesting:

- _____ Informal Mediation
- _____ Grievance Procedures
- _____ Impartial Hearing

