

NEVADA DEPARTMENT OF EDUCATION

Model Form to Assist Organizations/Individuals with Withdrawing a State Complaint

This form is intended to assist you in withdrawing a State Complaint. Although you are not required to use this form, you are required to submit any intended withdrawal in a signed written communication to the Nevada Department of Education (NDE). This written communication must clearly describe your intent to end the State Complaint investigation and the issuance of a report by the NDE.

Filling out the form: PLEASE READ CAREFULLY.

- A withdrawal of a State Complaint must be received by the NDE **before** the final report is issued. Please know that upon withdrawal of a State Complaint, the NDE will end the investigation and close the case. No further action will be taken on the State Complaint.
- The complainant must sign any written communication withdrawing the State Complaint. **The NDE does not accept emailed withdrawals.** Therefore, the withdrawal of a State Complaint must be either mailed or hand delivered to the NDE at 700 E. Fifth Street, Carson City, NV 89701, or sent by facsimile to (775) 687-1118.
- Please provide a copy of the withdrawal of the State Complaint to the named public agency at the same time that it is filed with the NDE.
- The withdrawal of your State Complaint does not impact the requirement that, for a future State Complaint, any alleged violation must have occurred less than one year before the date that such State Complaint is received by the NDE.

Your Name:¹ _____

Your Address: _____

Your Telephone Number: _____

Date: _____

Superintendent of Public Instruction
Nevada Department of Education
700 E. Fifth Street
Carson City, NV 89701-5096

Dear Superintendent of Public Instruction:

The purpose of this letter is to withdraw a State Complaint.

I filed a State Complaint with the Nevada Department of Education (NDE). The State Complaint was dated _____ and filed against _____ (*Name of the public agency*).

I am hereby withdrawing this State Complaint. I no longer wish the State Complaint investigation to continue, or a report of the investigation to be issued. I understand that upon NDE's receipt of this withdrawal, the NDE will notify me and the public agency that the case is closed and that no further action will be taken on the State Complaint.

Signature: _____

(Electronic signatures are **not** accepted)

¹ If you are representing an organization, please also indicate the name of the organization