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RYAN STEWART, ED.L.D.  
SECRETARY OF EDUCATION

MICHELLE LUJAN GRISHAM  
GOVERNOR

**COMPLAINT WITHDRAWAL FORM**

Case No. \_\_\_\_\_ Date complaint filed \_\_\_\_\_

Case Name: \_\_\_\_\_

Names of Parent(s)/Complainant(s): \_\_\_\_\_

Name of Student: \_\_\_\_\_

School District/Charter: \_\_\_\_\_

I, \_\_\_\_\_ the parent/guardian of \_\_\_\_\_

Print Name

Print Student's Name

am formally withdrawing this complaint. The reason I am withdrawing this complaint is:

D Parties' engaged in ADR/Facilitated IEP and resolved issues stated in complaint.

Or

D Parties' entered into a mediated agreement resolving issues stated in complaint.

Or

D Complaint withdrawn for other reasons.

Signature of parent/complainant: \_\_\_\_\_ Date: \_\_\_\_\_