



STATE OF NEW MEXICO
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SECRETARY OF EDUCATION

MICHELLE LUJAN GRISHAM
GOVERNOR

COMPLAINT WITHDRAWAL FORM

Case No.: _____ Date Complaint Filed: _____

Name of Parent/Complainant: _____

Name of Student: _____

School District or Charter School: _____

I, _____, the parent/guardian of _____

am formally withdrawing the above-referenced complaint. The reason I withdraw the complaint is:

Parties engaged in a Facilitated IEP Meeting which resolved the issues stated in the complaint;

Parties engaged in Mediation which resolved the issues stated in the complaint;
OR

Complaint withdrawn for the following other reason:

Signature of Complainant: _____

Date: _____