Members of the Board

Administration

June Getz – Chair Manny Guardado Lynnette Jenkins Damian Loporto Jody Molodow

Mary Jane Wagle

Margret Woelke Executive Director

Susan Huitron
Human Resources/
Business Operations Manager



Administrative Offices – PazLo Education Foundation Downtown Los Angeles

700 Wilshire Boulevard, Suite 400 Los Angeles, CA 90017

Phone: (323) 765-7014 www.matrix4success.org

Uniform Complaint Procedure Form

Last Name			First N	ame				
Student Name (if	applicable)			Grade	Date of Birt	h		
Address				City	Z	ip		
Home Phone		Cell P	hone		_ Work Phone			
Date of Alleged V	iolation		School/Off	ice of Alleged Vi	olation			
For allegations () Child Nutrition		nce, please check dependent Studies	k the program or a	ctivity referred t ant Education		nt if applicable: cial Education		
() Pupil Fees for	Educational Act	tivities	() Local Control	Accountability P	lan () Scho	ool Safety Plans		
() Education of P	upils in a Foste	r Care, Pupils who	are Homeless, forr	ner Juvenile Cou	ırt Pupils () After	School Safety		
() Bilingual Educ	ation	() Physical Ed	ucation Instructiona	l Minutes	() Loca	I Control (LCAP)		
() Every Student	Succeeds act/N	lo Child Left Behi	nd					
For complaints of unlawful discrimination, harassment, intimidation or bullying (employee-to-student, student-to-student, third party to student, employee-to-third party) filed no later than six months from the date it occurred or when knowledge was obtained that it occurred, check which actual or perceived protected groups upon which the alleged conduct was based: () Sex () Sexual Orientation () Gender () Gender Identity () Gender Expression								
() Ancestry	() Ethnic Grou	p Identification	() Race or Ethni	icity () Re	ligion () Natio	onality		
() National Origin	ı () lmı	migration Status	() Color	() Mental or Pl	hysical Disability	() Age		
() Lactating Stud	ent ()Ass	ociation with a pe	rson or group with o	ne or more of the	e actual or perceived	d groups listed here		
For bullying con school Title IX/B	•	•	protected groups a	nd other compla	aints not listed on	this form, contact your		
	, ,	ŭ		Brenda Esparza, Administrator of Student Services besparza@matrix4success.org				
			Victor Rojas, S vrojas@matrix	ocial Worker x4success.org				

For complaints of employee-to-employee discrimination or harassment, contact:

Susan Huitron, Human Resources/Operations Manager

Phone: 323.765-7005

email: shuitron@matrix4success.org

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Wa	e Business Operations Manager
1.	Please give the facts about your complaint. Provide details such as the names of those involved, dates, whether witnesses

	were present, etc., that may be helpful to the complaint investigator.	
2.	Have you attempted to discuss your complaint with any School/District Personnel? If so, with whom and what was	the result?
3.	Please provide copies of any written documents that may be relevant or supportive of your complaint.	
	I have attached supporting documents. Yes No	
	Signature Date	

Out of the transfer of the tra

Mail, email or hand-deliver your complaint/documents to:

Susan Huitron - Human Resources/Operational Manager PazLo Education Foundation-Matrix for Success Academy 700 Wilshire Blvd., Suite 400 Los Angeles, CA 90017 Phone: 323-765-7005

Email: shuitron@matrix4success.org