



Wisconsin Department of Public Instruction  
**PROCEDURAL COMPLIANCE SELF-ASSESSMENT PUBLIC AGENCY ASSURANCES**  
PI-3202-Assurances (Rev. 11-11)

Required by *Individuals with Disabilities Education Act, 2004*

**INSTRUCTIONS:** This form is required when the public agency identifies non-compliance during the Procedural Compliance Self-Assessment. This form may be signed by the District Administrator or Special Education/Pupil Services Director. If you have electronic signature capability, you may submit this form electronically to [james.verbick@dpi.wi.gov](mailto:james.verbick@dpi.wi.gov). Otherwise, return signed original by **FEBRUARY 15** to:

**WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION  
SPECIAL EDUCATION TEAM  
P.O. BOX 7841  
MADISON, WI 53707-7841**

<b>GENERAL INFORMATION</b>	
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Public Agency	LEA Code
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<b>CORRECTION OF NONCOMPLIANCE</b>	
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- I HEREBY CERTIFY**, on behalf of the public agency named above, the public agency corrected all student-level noncompliance identified during the *Special Education Procedural Compliance Self-Assessment* and conducted activities to ensure current compliance of those procedural requirements found in error.

<b>INTERNAL CONTROL SYSTEM</b>	
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- I HEREBY CERTIFY**, on behalf of the public agency named above, the public agency has established an internal control system to identify and correct noncompliance.

<b>SIGNATURES</b>	
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Printed Name of Public Agency Administrator	
Signature of Public Agency Administrator	Date Signed
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