

Public Complaints

Public Complaint Form - Level One

To file a formal complaint, please fill out this form completely and submit it by hand delivery, fax or U.S. mail to the appropriate administrator within the time established in GF(LOCAL). All complaints will be heard in accordance with GF(LEGAL) and (LOCAL) or any exceptions outlined therein.

Name _____

Address _____

Telephone Number (_____) _____

Email _____

If you will be represented in voicing your complaint, please identify the person representing you.

Name _____

Address _____

Telephone Number (_____) _____

Date Concern/Dispute Occurred: _____

1. Please describe your statement of Concern or Dispute. _____

2. Please explain how you have been harmed by this decision or circumstance. _____

3. What rule, regulation and/or school board policy has been broken or violated. _____

4. Please describe any efforts you have made to resolve your complaint informally and the responses to your efforts. _____

With whom did you communicate? _____ On what date? _____

5. Please describe the outcome or remedy you seek for this complaint. _____

Signature _____

Signature of Complainant's representative _____

Date of filing _____

Complainant, please note:

A complaint form that is incomplete in any material way may be dismissed, but may be re-filed with all the required information if the re-filing is within the designated time for filing a complaint.

Please attach to this form any documents you believe will support the complaint; if unavailable when you submit this form, they may be presented no later than the Level One conference. Please keep a copy of the completed form and any supporting documentation for your records.

FOR OFFICE USE ONLY

Date Received by District _____

Received by _____

Copies to _____

Conference to be held by _____