

COMPLAINT FORM

Date _____

Name of Complainant _____

Address of Complainant _____
street *city* *zip*

School _____

Assignment (if employee) _____

Grade (if student) _____

1. Date Cause of Complaint Occurred _____

2. Statement of Complaint _____

3. Identify Specific Provision of the Law or Regulations Violated _____

4. Identify Specific Relief Sought _____

signature

date

Disposition by Responsible Official _____

signature

date