



COMPLAINT FORM- LEVEL ONE (CAMPUS)

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 campus administrator within the time established in board policy FNG (LOCAL). All complaints will be heard in accordance with FNG (LEGAL) and (LOCAL) with any exceptions outlined therein.

PARENT NAME: _____
STUDENT'S NAME: _____
ADDRESS: _____

TELEPHONE NO: _____
CAMPUS: _____
PRINCIPAL: _____

Please describe the decision or circumstances causing your complaint (give specific factual details):

What was the date of the decision or circumstances causing your complaint? _____

Please explain how your child may have been harmed by this decision or circumstance.

Please describe any efforts you have made to resolve your complaint informally at the campus level and the responses to your efforts.

With whom did you communicate at the campus? _____

On what date? _____

Please describe the outcome or remedy you seek for this complaint. (Please be specific)

Parent signature: _____

If you will be represented by someone other than yourself, please identify the person representing you.

Name: _____

Address: _____

Telephone: _____

Date of filing: _____ Date Received by District: _____

Complainant, please note:

Please ensure you have completed this form entirely before submitting. Forms lacking complete information may not be able to be addressed within the timeline constraints. Any additional evidence or information may be attached to this form.

All evidence may be presented no later than the Level One conference. Please keep a copy of this completed form and any supporting documentation for your records.