

PUBLIC COMPLAINTS ABOUT EMPLOYEES

COMPLAINT FORM

NAME: _____ DATE _____.

POSITION: (Student, teacher, parent, patron, etc.) _____

WHERE MAY YOU BE REACHED: Address

Phone

EXPLAIN NATURE OF COMPLAINT:

REQUESTED REMEDY:

DEPOSITION RESPONSE #1: (Building Level)

DEPOSITION RESPONSE #2: (Building Level)

DEPOSITION RESPONSE #3: (District Level)

DEPOSITION RESPONSE #4: (District Level)

NOTE: BOARD MEMBERS ARE ENCOURAGED TO PROCESS ALL COMPLAINTS USING THIS PROCEDURE. WE MUST AGREE TO DISAGREE - WE MUST ALSO AGREE HOW TO DO IT RATIONALLY.