

**LOCKHART INDEPENDENT SCHOOL DISTRICT  
COMPLAINTS/GRIEVANCE FORM – LEVEL III  
(For Directions See Back)**

On the date listed below, a grievance was presented and the results will become a part of campus/district annual record.

**Grievances shall be presented at the appropriate level with intent that, whenever feasible, the complaint be resolved at the lowest possible administrative level.**

Name	Date Submitted
School/Campus	Date of Event(s)

Grievance Explanation: (Please be as specific as possible with facts that support the complaint – attach documentation from Level I and Level II conference.)

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(use reverse side if necessary)

Person(s) Against Whom Complaint Is Filed: \_\_\_\_\_

Brief explanation of the outcome of Level I and Level II Conference: \_\_\_\_\_

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Relief Being Requested from Level II meeting: \_\_\_\_\_

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(use reverse side if necessary)

Person Presenting Grievance: \_\_\_\_\_

Signature

Employee Representative: \_\_\_\_\_  
(if applicable) Name Phone Number

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I have read the above information: \_\_\_\_\_  
Administrator's Signature

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