

PARENT / STUDENT'S COMPLAINT FORM
LEVEL ONE (Principal)

This form must be filled out completely by a student or parent within 15 days of the date the student or parent first knew of the decision or action giving rise to the complaint or grievance;

1. Student's Name _____ Grade _____ Campus _____

2. Parent's Name _____ Daytime Phone _____

3. Date of Incident _____

4. Please write a brief description of the incident

5. Has this incident been reported to anyone else? _____
Name & Position

6. What remedy do you seek to this complaint?

Student/Parent Signature Date _____

Received by Date _____

Please provide the student/parent a copy of this report at filing.