

**Kennewick School District**  
**Staff Complaint Form**

**Directions for Staff Members:**

***Complete the following form (please print) and submit it to the Director of Human Resources.***

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Telephone number where you can be reached: \_\_\_\_\_

Specify the name of the person, school (give department), program activity, etc. about whom you wish to register a complaint:

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Specify your complaint by stating the problem as you see it. Describe the incident, participants, background to the incident, and any attempts you have made to resolve the problem. Please note relevant dates, times, and places:

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Indicate if there are other people who could provide more information regarding your complaint (name and building location):

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Indicate your opinion on how this problem might be resolved. Provide your proposed solution and be as specific as possible:

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**I certify that there is no falsification of the above information and events are accurately depicted to the best of my knowledge.**

\_\_\_\_\_  
**Signature of Complainant**

\_\_\_\_\_  
**Date**