



## Greater Lowell Technical High School

### SCHOOL RESOURCE OFFICER (SRO) COMPLAINT RESOLUTION FORM

**COMPLETE THIS SECTION OF THE COMPLAINT RESOLUTION FORM TO REPORT A COMPLAINT ABOUT GREATER LOWELL TECHNICAL HIGH SCHOOL'S SCHOOL RESOURCE OFFICER(S) (SRO)**

School Resource Officer    Staff    Parent    Student    Other \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Primary Language: \_\_\_\_\_

SRO Involved \_\_\_\_\_

Brief Statement of Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Person Filing this Report: \_\_\_\_\_ Date \_\_\_\_\_

**All complaints regarding an SRO(s) should be sent to the Assistant Superintendent/Principal.**

**SRO'S SHOULD COMPLETE THIS SECTION OF THE COMPLAINT RESOLUTION FORM TO REPORT A COMPLAINT ABOUT GREATER LOWELL TECHNICAL HIGH SCHOOL STAFF MEMBER(S).**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Primary Language: \_\_\_\_\_

Staff Member Involved \_\_\_\_\_

Brief Statement of Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of SRO Filing this Report: \_\_\_\_\_ Date \_\_\_\_\_

**Complaints should be sent to the Assistant Superintendent/Principal. When the concern involves the Assistant Superintendent-Principal, it shall be sent to the Superintendent-Director and when the concern involves the Superintendent-Director it shall be sent to the Chairman of the School Committee.**