



# MANOR INDEPENDENT SCHOOL DISTRICT COMMUNITY MEMBER GRIEVANCE FORM

## Level One

To file a formal complaint, please fill out this form completely and submit it by hand delivery OR by electronic communication, to **Human Resources, Risk Management Coordinator, Shayna Santiago-Molinar by email: [Shayna.Molinar@manorisd.net](mailto:Shayna.Molinar@manorisd.net)** within the time established in DGBA (LOCAL). All complaints will be processed and heard in accordance with DGBA (LEGAL) and (LOCAL) or any exceptions outlined therein.

### Community Member Information

Community Member's First Name	
Community Member's Last Name	
Community Member's Home Address - Full Address, STE, State, Zip	
A. Cell Phone Number	
B. Home Phone Number	

### Details of Events Leading to Grievance

Provide a detailed account of all efforts you have made to resolve your complaint informally. Be sure to include the responses to your effort.

A. To whom did you present your informal complaint?	A.
B. Provide the first, last name, position and department/campus	B.
Date and Time of conference <i>Example: (7/24/2024 at 5pm)</i>	



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Level One - Continued

**Grievance or Compliant**

State your full complaint, including the individual harmed alleged, facts, and witnesses, if any, to support your complaint. (You may attach a separate sheet if necessary.)

Attach any additional supporting documents or information to this form.

State the date(s) of the event or series of events causing the concern or grievance. (Provide all relevant dates)

State the outcome or remedy you seek for this compliant.

**If you will be represented by another party in pursuing your compliant, please identify the person representing you below:**

Representative - First and Last Name	
Representative - Affiliated Organization or Firm	
Representative - Address of Affiliated Organization or Firm	
Email Address - Representative	
Representative - Phone Number	

A complaint form that is incomplete in any material way may be dismissed, but may be refiled with all the required information if the refiled is within the designated time for filing a complaint. Attach to this form any documents you believe will support the complaint. If documents are unavailable when you submit this form, they may be presented no later than the Level One conference. Please keep a copy of the completed form and any supporting documentation for your records.

Community Member Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR MANOR ISD OFFICE USE ONLY**

Received By: \_\_\_\_\_ Date Received: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Initials: \_\_\_\_\_