



Selma Unified School District
Uniform Complaint Procedures
Form

revised 10/2025

Last Name _____ First Name _____

Student Name (if applicable) _____ Grade _____ Date of Birth _____

Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email Address _____

Date of Alleged Violation _____ School/Office of Alleged Violation _____

For allegations of noncompliance, please check the program or activity referred to in your complaint:

- Adult Education
- Consolidated Categorical Aid
- School Safety Plans
- Child Nutrition
- Special Education
- Migrant Education
- Foster/Homeless
- Agricultural Vocational Education
- After School Education/Safety
- Tobacco-Use Ed
- Local Control Accountability Plan
- Physical Education Minutes
- Regional Occupational Centers and Programs
- Every Student Succeeds Act Economic Impact Aid
- Pupil Fees for Educational Activities
- California Peer Assistance/Review Program for Teachers
- Career/Technical Education, Career Technical and Technical Education/Training
- Courses without Educational Content

For complaints of discrimination, harassment, intimidation, and/or bullying (employee-to-student, student-to-student, and third-party to student), please check which of the actual or perceived protected characteristics upon which the alleged conduct was based:

- Sex
- Sexual Orientation
- Gender
- Gender Identity
- Gender Expression
- Ancestry
- Ethnic Group Identification
- Race or Ethnicity
- Religion
- Nationality
- National Origin
- Age
- Color
- Mental or Physical Disability
- Lactating Student
- Association with a person or group with one or more of the actual or perceived categories listed above

For complaints of bullying that are not based on the above-listed protected characteristics, and other complaints not listed on this form, please contact your school principal.

Signature _____ Date _____