



Marshfield R-I Schools

C-120-A Concerns or Complaints Form A

Name: _____ E-mail Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Please list the specifics of the complaint:

List the specific laws, policies, or regulations you believe have been violated:

Please list the names and titles of individuals you presented your concerns to prior to completing this form:

What resolution to your concern was presented that was not acceptable to you?

What action would you like the district to take?

Signature: _____ Date: _____