



Employee Complaint Form: Level One

Any employee filing a complaint must fill out this form completely and submit it to his or her principal or immediate supervisor. All complaints will be processed in accordance with [DGBA \(Legal\) and \(Local\)](#) or any exceptions outlined therein.

1. Name: _____

2. Your campus and position: _____

3. Please state the date of the event or series of events causing the complaint:

4. Please state your complaint, including the individual harm alleged.

5. Please state specific facts of which you are aware to support your complaint, listed in detail.

6. Please state the remedy you seek for this complaint.

Employee Signature

Date Submitted