STUDENT GRIEVANCE COMPLAINT FORM

Name of complainant: __________________________________________

Student Name and School: _________________________________________

Date of complaint: ______________________________________________

Name of alleged person: __________________________________________

Date and place of incident or incidents: ______________________________

__________________________________________________________________

Description of misconduct (use additional sheets if necessary): __________

__________________________________________________________________

__________________________________________________________________

Name of witnesses (if any): ________________________________

__________________________________________________________________

Evidence of incident, i.e.: letters, photos, etc. (attach evidence if possible)

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

Any other pertinent information: ________________________________

__________________________________________________________________

__________________________________________________________________

I agree that all of the information on this form is accurate and true to the best of my

knowledge.

Signature: __________________________ Date: __________

Return form to: Building Administrator

ADOPTED: 11/13/00
7/9/07

Reviewed: 7/9/07, 2/3/11, 4/7/16, 5/2/19