

# FORMAL COMPLAINT/GRIEVANCE

Against: \_\_\_\_\_

## Complaint Information

Name _____	Date _____
Address _____ _____	Phone _____
	School _____

**NOTICE OF COMPLAINT:** *Please describe your complaint as specifically as possible. Include date, time, names, locations, or situation*

DATE OF EVENT OR SERIES OF EVENTS CAUSING THE COMPLAINT:  
\_\_\_\_\_  
\_\_\_\_\_

COMPLAINT INCLUDING THE INDIVIDUAL HARM ALLEGED (include specific facts of which you are aware to support your complaint (LIST IN DETAIL):  
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With whom have you conferred to resolve this complaint:  
Name (s) \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What action or remedy are you seeking to resolve this complaint?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_