

# SOAP LAKE SCHOOL DISTRICT

## COMPLAINT FORM

To: Superintendent

Date \_\_\_\_\_

Name of person(s)/program complaint is made against: \_\_\_\_\_

Description of complain (include names, dates and places): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

|   | Yes   | Name  | Date  |
|---|-------|-------|-------|
| Have you discussed the complaint with employee? | _____ | _____ | _____ |
| Principal?                                      | _____ | _____ | _____ |
| Superintendent?                                 | _____ | _____ | _____ |

Result of discussion(s) \_\_\_\_\_

\_\_\_\_\_

I understand that:

1. The School District may request further information about this complaint, and if such information is available, I shall present it upon request.
2. A copy of this complaint will be given by the School District to the persons against whom this complaint is being made, and he/she will be given the opportunity to respond in writing to this complaint and that I will receive from the School District a copy of such response.
3. If a hearing is held on this complaint, it will be held in executive session with press and public excluded and I will be informed of the time, date, and place such a hearing will be held.

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_

\_\_\_\_\_  
Address(es)

\_\_\_\_\_

Phone: \_\_\_\_\_

(You may use additional pages to describe you complaint more fully if you so desire.)