

UNION SCHOOL DISTRICT

Uniform Complaint Form

Ex 1312.3

TO: Secretary of the Board of Trustees

FROM: Name: _____

Address: _____ Phone: _____

Nature of Complaint: (This should be a description in your own words of the grounds of your complaint, including all names, dates and places necessary for a complete understanding of your complaint).

Have you discussed this complaint with a District employee(s)? _____

To whom have you spoken? (Name(s)) _____

When? (Date(s)) _____

What was the result of your discussion? _____

What resolution do you seek? _____

Signature _____ Date _____