



Name: _____ Date Submitted: _____ Date of Incident: _____

Complaint against: _____

In order for a Grievance to be filed, ONE of the following must be true:

- Issue was addressed with the offending party with no resolution. Date: _____
- It is not safe to address the aggressor in this case.

AND both of the following must be true:

- Met with administration on _____. *Attach a summary of the discussion.*
- I believe this issue is unresolved by school administration and in need of further attention.

Specify your complaint by stating the problem. Describe the incident, participants, background, and any attempts you have made to solve the problem. List relevant dates, times, and places.

Identify any witnesses to the offending conduct (Name, address, telephone if possible).

Do you consider this conduct to be discrimination or harassment based upon race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age, gender or sexual orientation? If your answer is "yes" to any of the above, why?

I certify that this information is correct to the best of my knowledge.

Signature of Complainant

Date