School Distriction School Distri

Rev. May 2022

Weaver Union School District

1240 D Street Merced, California 95341 (T) 209.723.7606 (F) 209.725.7128

Weaver Middle School*Pioneer Elementary School*Farmdale Elementary School

COMPLAINTS CONCERNING SCHOOL DISTRICT PERSONNEL FORM

Please comp	olete all information. If you need h	elp filling out the form, please c	call (209) 723-7606.	
Date:	Name of Complainant:		School:	
Address:		City:	State:	Zip Code:
Phone Numb	per(s) Day:	Evening:	Cell:	
Name of Par	ent if not the Complainant:			
Name of Stu	dent(s) Involved:			
	complaint against the following D Name:		on:	
If the allege	DUR COMPLAINT: Please be as faced misconduct has occurred over of any prior attempt to discuss the	a period of time, please inc	dicate the time period	l in question. Provide a specific
(If you need	additional space, you may attach a	a separate sheet of paper to this	s complaint form.)	
REMEDY REC	QUESTED: What do you want as a	result of filing this complaint?		
Signature of	Complainant:			
related to di	te with WUSD Board Policy/Admin strict personnel, other than admin for investigating complaints shall	nistrators, shall be submitted in	n writing to the princip	oal or immediate supervisor. Staff
File thi	is form with the Weaver Union Sc	hool District Superintendent's	Office at 1240 D Street	, Merced, California 95341
(For Office U	se Only)			
Date Receive	ed:			
Administrato	or's Signature:			