

# LUNENBURG COUNTY PUBLIC SCHOOLS



## CONCERN FORM

Parent/Guardian's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

School: \_\_\_\_\_ Bus: \_\_\_\_\_ Grade: \_\_\_\_\_

Please briefly express your concern: (attach additional sheet, if necessary) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Suggestions to resolve concern: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Signature

Date

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### ADMINISTRATIVE ACTION

- Conference with the Parent & Student
- Call to Parent
- Forwarded to School Administration
- Forwarded to Transportation

Final Disposition: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Administrator's Signature

Position

Date