

Dalhart I.S.D.
COMPLAINT FORM: LEVEL ONE APPEAL NOTICE
Board Policy FNG(LOCAL)

Any parent/student filing a complaint must fill out this form completely and submit it to lowest level administrator who has the authority to remedy the alleged problem. In most circumstances, the Level One complaint should be filed with the campus principal. All complaints will be processed in accordance with FNG(LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Name of person filing complaint: _____

Name of student for whom appeal is made (if applicable): _____

Address: _____

Home Phone # _____ Other Phone # _____

Campus/Department _____ Grade Level _____

2. Complaint is being made against: _____

3. Date of the circumstance or series of circumstances causing your complaint: _____

Note: The Board encourages parents/students to discuss their concerns and complaints through informal conferences with their teachers, principal, or other appropriate administrator. Concerns should be expressed as soon as possible to allow early resolution at the lowest possible administrative level. If an informal conference regarding a complaint fails to reach the outcome requested, the parents/students may initiate the formal process by filing this written complaint form.

4. Please describe any efforts you made to resolve your complaint informally and the responses you received:

Level one complaint should be submitted to the campus principal within fifteen days of knowledge of the decision or action giving rise to the complaint. The appropriate campus administrator will hold a conference with the student or parent within ten days after receipt of the written complaint. The administrator will have ten days following the conference to provide a written response.

5. Please state the reason for your complaint. Please describe in factual detail the events surrounding the complaint against the above named person. You must include dates, times, locations, persons present, statements made, etc. Be as factual as possible. Attach additional pages if necessary.

6. Persons having personal knowledge of the facts stated in the complaint:

7. Please state the harm alleged and identify the person or persons alleged to be harmed.

8. Please state what specific relief or resolution you are requesting:

9. If you will be represented in pursuing your complaint, please identify the individual or organization representing you.

Name _____

Address _____

Telephone (____) _____

Sign and date below. Please attach any additional written pages or documentation.

"I affirm that the above and attached statements are true to the best of my knowledge."

Signature of person submitting complaint

date

Signature of person receiving complaint

date