Code No. 101.3E2

Grievance Form for Complaints of Discrimination or Non-Compliance with Federal or State Regulations Requiring Non-Discrimination

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| I,                                                                    , am filing this grievance because |
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(Attach additional sheets if necessary)

Describe incident or occurrence as accurately as possible:

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(Attach additional sheets if necessary)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Signature | |  | | | | |  |  | | |
|  | | | | | |  |  |  | | |
| Address |  | | | | | |  |  | | |
|  | | | | | |  |  |  | | |
| Phone Number | | |  | | | |  |  | | |
|  | | | | | |  |  |  | | |
| If student, name | | | |  | | | | | Grade Level |  |
|  | | | | | |  |  |  | | |
| Attendance center | | | | |  | |  |  | | |

Name of Individual Alleging Discrimination or Non-Compliance

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| --- | --- | --- |
| Name |  | |
|  | |  |
| Grievance Date | |  |

State the nature of the complaint and the remedy requested.

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Indicate Principal's or Supervisor's response or action to above complaint.

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| Signature of Principal or Supervisor |  | |

Approved: October 22, 2012

Revised/Reviewed: December 22, 2014