

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

I, _____, am filing this grievance because

(Attach additional sheets if necessary)

Describe incident or occurrence as accurately as possible:

(Attach additional sheets if necessary)

Signature _____

Address _____

Phone Number _____

If student, name _____ Grade Level _____

Attendance center _____

Name of Individual Alleging Discrimination or Non-Compliance

Name _____

Grievance Date _____

State the nature of the complaint and the remedy requested.

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

Signature of Principal or
Supervisor

Approved: October 22, 2012

Reviewed: December 22, 2014