INSTRUCTIONS TO THE MANAGEMENT TEAM MEMBER REVIEWING THE COMPLAINT: Please use this form to document any complaints concerning employees. This form should be used at the site/department level when processing complaints at Level I or Level II of Administrative Regulation 1312.1 Complaints Concerning Employees.

To (Supervisor):
From (Complainant name):
School/ Department:
Contact Phone and Email:

COMPLETE THIS SECTION OF THE COMPLAINT INVOLVES A STUDENT

Student Name(s):
Grade:

CONFERENCE HELD:
Date
Time
Present:

1. NATURE OF THE CONCERN

2. REMEDY SOUGHT BY COMPLAINANT

3. NEXT STEPS

4. RESOLUTION

OFFICE USE. Received in HR: [Date & time stamp with initials]
Reviewed in HR: [Date & initials]
Complaint routed to:
Initial the level of the final disposition
1 2 3 4
Signature of Appropriate District Administrator Date

BOARD POLICY 1312.1/1312.2
DISTRIBUTION: Original- Assistant Superintendent Human Relations Copy- Complainant
K:\Certificated HR\COMPLAINTS\Complaint Conference Form.docx