

**Richmond School District Policy Statement
Equal Educational Opportunities**

**Policy #: 411
Administrative Procedure**

Richmond School District Complaint Form

Name of person/organization filing the complaint:			
Contact information		Phone Home: _____	Cell: _____
Status of person filing complaint			
Student _____	Parent _____	Employee _____	Other _____
Parties Involved:		Date of Incident:	
Statement of complaint (include specific incident(s)):			
What steps should be taken to resolve this concern?			

Signature of Complainant

Date of complaint filed

Signature of person receiving complaint

Date Received

Submit all copies to District Administrator or his/her secretary. The person receiving the complaint will sign and date the complaint. One copy will be returned to the complainant, and one copy will be sent to the complaint investigator. The district will respond to the complaint within ten (10) school days.

Resolution:

