

EMS ISD PUBLIC COMPLAINT FORM - LEVEL ONE

To file a formal complaint, please fill out this form completely and submit it by hand delivery, email or U.S. Mail to the EMS ISD to the **Director of Compliance and Policy in the Student Services Department** within the time established in board policy GF (LOCAL). All complaints will be heard in accordance with GF (LOCAL) or any exceptions outlined therein.

NAME: _____
ORGANIZATION NAME: _____
ADDRESS: _____
TELEPHONE NO: _____

Please describe the decision or circumstances causing your complaint (give specific factual details):

What was the date of the decision or circumstances causing your complaint? _____

Please explain how you (or your organization) have been harmed by this decision or circumstance.

Please describe any efforts you have made to resolve your complaint informally at the campus level and the responses to your efforts.

With whom did you communicate in the District? _____

On what date? _____

Please describe the outcome or remedy you seek for this complaint.

Signature _____

Date of filing: _____

Please note:

A complaint form that is incomplete in any material way may be dismissed, but may be refiled with all the required information if the refileing is within the designated time for filing a complaint.

Attach to this form any documents you believe will support the complaint; if unavailable when you submit this form, they may be presented no later than the Level One conference. Please keep a copy of the completed form and any supporting documentation for your records.