INTERNAL COMPLAINT FORM

Your Name: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Date of Alleged Incident(s):_____

Name of Person(s) you have a complaint against: _____

_____

List any witnesses that were present: _____

_____

Where did the incident(s) occur?

_____

Please describe the events or conduct that are the basis of your complaint by providing as much factual detail as possible (i.e. specific statements; what, if any, physical contact was involved; any verbal statements; what did you do to avoid the situation, etc.). Attach additional pages, if needed:

_____

_____

_____

_____

I hereby authorize the School to disclose the information I have provided as it finds necessary in pursuing its investigation. I hereby certify that the information I have provided in this complaint is true and correct and complete to the best of my knowledge and belief. I further understand that providing false information in this regard could result in disciplinary action up to and including termination or expulsion from the School.

_____ Date: _____

Signature of Complainant

_____

Print Name

To be completed by the School:

Received by: _____ Date: _____