

**Cesar Chavez Community School**

**Formal Complaint  
from the Public**

**INSTRUCTIONS:** Complete sections I and II of this form when filing a formal complaint. Within three (3) work days after filing the complaint with the principal/supervisor, you will be contacted to set up a meeting to discuss the complaint.

**Part I – COMPLAINANT INFORMATION** (to be completed by Complainant)

Complainant \_\_\_\_\_ Phone #: \_\_\_\_\_

Complainant Address \_\_\_\_\_ Alternate #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date, time and location where incident occurred:

Witness \_\_\_\_\_ Witness \_\_\_\_\_

Student Name (if applicable) \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_

Yes No Prior to filing this Formal Complaint, I have discussed my complaint/concern with the principal/supervisor through an informal complaint process.

If yes, describe the informal process:

If no, explain why:

**Part II – INCIDENT INFORMATION** (to be completed by Complainant)

Describe the incident(s) as clearly as possible, including such details as any verbal statements (i.e. threats, requests, demands).

Action Requested

I hereby certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge and belief.

\_\_\_\_\_ Date

\_\_\_\_\_ Complainant

\_\_\_\_\_ Date

\_\_\_\_\_ Received by

**Cesar Chavez Community School**  
**Formal Complaint from the Public (con't)**

**Part III – FACILITATION** (to be completed by Principal/Administrator)

Date and location of scheduled meeting: \_\_\_\_\_

Individuals contacted to attend meeting:

Yes    No    Principal/Supervisor or Complainant will bring legal counsel to meetings.    Other participants contacted

**Part IV – MEETING INFORMATION** (to be completed by Principal/Administrator)

Date and location of scheduled meeting: \_\_\_\_\_

List participants:

Others, please explain \_\_\_\_\_

Action on Complaint:

Describe the final resolution or the next step(s) to a resolution:

Yes    No    Additional Meeting    Date and location of next meeting: \_\_\_\_\_

Individuals to contact for next meeting:

\_\_\_\_\_ Date                      Complainant                      \_\_\_\_\_ Date                      Principal/Supervisor

As needed:

\_\_\_\_\_ Date                      Governance Council President

**Distribution:** Complainant, Principal/Supervisor, Governance Council President as needed