

**Calhoun County Board of Education
Student / Parent Complaint Form**

This form may be used as part of the Board's Complaint / Grievance Procedure by students and parents who wish to initiate a formal written complaint involving violations of the Board's *Policy for Prevention of Student Harassment, Sexual Discrimination and Harassment Policy, Racial Harassment Policy*, or other violations of law or policy directly affecting the rights of the complaining party.

Date: _____ School: _____

Name of Student / Complaining Party: _____

Parents: _____

Address: _____

Telephone: Home _____ Cell / Other _____

Does this complaint involve physical violence or the threat of physical violence or injury? ___No ___Yes

Has there been a threat of suicide in connection with this incident / complaint? ___No ___Yes

If yes, please provide additional details. _____

Provide a complete description / explanation of the complaint, including the date of the incident on which the complaint is based, names of students or others responsible or involved in the incident, names of witnesses, and all other relevant facts. Use the back or attach additional paper as needed.

Describe any earlier efforts to resolve this matter or the reasons no such efforts were pursued.

What specific remedy or corrective action are you seeking?

Student Signature

Parent Signature