

West Central School District 49-7



WEST CENTRAL SCHOOLS #49-7

COMPLAINT AND RESOLUTION FORM – REGARDING EMPLOYEES OR PROCEDURES

Name of Complainant: _____

Address: _____

Phone: _____ Cell: _____

Email: _____

In order to advance your complaint beyond the informal stage you must complete the following information and respond to all questions. Attach additional pages if necessary.

Please state or describe your concerns, being as specific as possible as to times, events, people involved, etc. (If your complaint involves an employee you must first meet and discuss the issue with the employee. If you feel you cannot undertake such a meeting explain why in writing.)

If this involves a District employee, state the employee’s name and position:

If this involves a District procedure that you feel is unfair, identify the procedure and state your concerns with the procedure: (If your complaint involves a Board Policy identify that policy.)

State all facts, dates, witnesses, and attach all documents you believe apply to this issue: You are reminded that deliberate false statements to a governmental agency, including a School District, are punishable by law. *(Use additional pages as needed.)*

Please list or describe the action that you feel is necessary or required to resolve this situation: *(Use additional pages as needed.)*

Parent Parent Date

Student (if applicable)

DISTRICT ACTION

STEP 1

Date written Complaint Received: _____

Result of Informal Resolution (If applicable):

Results of Investigation: (Use additional pages as needed.)

Persons interviewed:

Documents reviewed (Attach copies):

Decision: (Use additional pages as needed.)

Signature/Position

Date

STEP 2

Date Request for Review Received: _____

Results of Investigation: (Use additional pages as needed.)

Persons interviewed:

Documents reviewed (Attach copies):

Decision: (Use additional pages as needed.)

Principal's Signature

Date

STEP 3

Date Request for Review Received: _____

Results of Investigation: *(Use additional pages as needed.)*

Persons interviewed:

Documents reviewed (Attach copies):

Decision: *(Use additional pages as needed.)*

Superintendent's Signature

Date

STEP 4

Date Request for Review submitted to Board: _____

BOARD ACTION:

Administration's Decision Adopted and Affirmed. _____ Date: _____

Hearing Ordered:

Date of Hearing: _____ Hearing Number: _____

(NOTE: The record of the hearing will consist of the contents of this file, additional documents submitted at the hearing, sworn testimony of witnesses and the Board's Final Action. The Board may engage a court reporter or utilize other means to create a verbatim record. Any person appealing the Board's action to court shall bear the cost of reducing the verbatim record to a written transcript. Parties are entitled to be accompanied by an attorney of their own choosing at their own cost. The Board may engage its own attorney and the administration may be advised by an attorney at District expense.)

Facts as Found by the Board based upon the Record: *(Use additional pages as needed.)*

Conclusions Drawn by the Board applying the laws, regulations and policies to the facts: *(Use additional pages as needed.)*

Board's Final Decision: *(Use additional pages as needed.)*

Date of the Board's Decision: _____

Date Decision mailed to the Parties: _____

Signature of Board Presiding Officer

BOARD MOTION IN OPEN SESSION:

1. **Matters involving a student:**

Moved by: _____, Seconded by: _____

That the Board's written Decision in Hearing No. _____ is hereby adopted and approved in open session of the West Central School Board. As the matter involves a student or students the facts and the Board's action remains confidential under both State and Federal Law.

2. **Matters involving a District Procedure:**

Moved by: _____, Seconded by: _____

That the administrative procedure known as " _____ " is hereby:

____ Approved

____ Modified as follows: *(Use additional pages as needed.)*

____ Disapproved

____ Adopted as Board Policy to be known as " _____ "

Signature of Board President

CERTIFICATION:

I, Business Manager of the West Central School District #49-7, hereby certify that the foregoing Motion was approved by majority vote of the West Central School Board, in open session, at a properly called meeting held on the _____ day of _____, 20__.

Signature

Date

Policy:

Adopted: 12/12/88

Amended: 8/23/93

Amended: 4/11/11