

SCOTT VALLEY UNIFIED SCHOOL DISTRICT
District Complaint Form

Any staff member, parent, student, community member or applicant who has a complaint regarding an employee, a district policy, or other condition of the Scott Valley Unified School District may submit the complaint by completing this form and filing it with the school principal or appropriate District administrator. *Please refer to relevant Board Policies on the reverse side of this form.*

Name: _____ Date Complaint Filed: _____

Address: _____ Phone #: _____ Email: _____

Please identify yourself as: Employee Parent Student Applicant Community Member
Other (please state here): _____

Part I – Complaint (*Note: All sections of Part I must be completed.*)

A. Please indicate the type of complaint below: (Please see reverse of form for Board Policies regarding complaints.)

B. Statement of the problem: (Please be as precise as possible; include specific facts: names, dates, times, location, witnesses, etc. Attach additional pages if necessary.)

C. Remedy sought:

D. Is a conference requested? Yes No

E. Signature of Complainant: _____

All complaints will be responded to by the appropriate administrator. A copy of the response will be mailed to you within 30 days. If you are not satisfied with the response, you should contact the administrator and explain your dissatisfaction. If you are still not satisfied, resubmit the complaint to the responding administrator's supervisor. That supervisor can be identified by calling 468-2727.

Part II – Response to Complaint

A. Finding of Facts:

B. Administrative responses/action taken:

C. Signature of Responding Administrator: _____

All complaints will be retained at the District Office, 11918 Main St., Fort Jones, CA 96032

(Please see reverse side of this form for references to Board Policies.)

For Office Use Only

Date received: _____

By: _____

Code: _____ E 1312.1; 1312.3 Revised: August 6, 2007

E 1312.1; 1312.3

The following are the Board Policies, Administrative Regulations and Exhibits (forms) that address the various types of complaints and the remedy for the complaint.

If your complaint involves a policy in Section A, please use this form.

Section A: Type of Complaint	Board Policy (BP) /Administrative Regulation (AR) / Exhibit (E)
Complaints Concerning School District Employee(s)	BP/AR/E 1312.1
Complaints Concerning Schools (Uniform Complaint Procedures); Discrimination in Programs	BP/AR/E 1312.3
Nondiscrimination in Employment (Discrimination/Harassment includes discrimination based on age, sex, sexual orientation, gender, ethnicity, race, ancestry, national origin, religion, color, mental or physical disability.)	BP/AR/E 4030
Complaints by Employees	BP/AR/E 4144; 4244; 4344
Nondiscrimination/Harassment (Student complaints) (Discrimination/Harassment includes discrimination based on age, sex, sexual orientation, gender, ethnicity, race, ancestry, national origin, religion, color, mental or physical disability.)	B/AR/E 5145.3
Sexual Harassment (Student complaints)	BP/AR/E 5145.7

If your complaint concerns a policy in Section B, please request the appropriate form from the School Site or the District Office.

Section B: Type of Complaint	Board Policy (BP) /Administrative Regulation (AR) / Exhibit (E)
Williams Case Complaint (Complaints concerning insufficiency of instructional materials, emergency or urgent facilities conditions, teacher vacancy or misassignment issues.)	AR/E 1312.4
Sexual Harassment (Employee complaints)	BP/AR/E 4119.11; 4219.11; 4319.11
Reconsideration of Instructional Materials/Resources (Complaints regarding instructional materials.)	AR/E 6161.2