

FONTANA UNIFIED SCHOOL DISTRICT
WRITTEN COMPLAINT FORM

In accordance with Board Policy 1312.1, persons wishing to lodge a formal complaint against district employees are to do so in writing. Please provide the information requested on this form and return the top two copies to the Office of the Superintendent, Fontana Unified School District, 9680 Citrus Avenue, Fontana, CA 92335.

From:

Name(s)

Address(es)

Telephone(s)

Name of school or office, or name of employee and job location, against whom charge or complaint is directed:

Nature of the charge or complaint:

(Attach additional pages if necessary)

Distribution: Original - Complaint Officer
 Copy - Site Administrator
 Copy - Complainant

CHARGE OR COMPLAINT (continued)

When did the event(s) occur? Date(s): _____

Has the charge or complaint been discussed with the school principal, or employee, or his/her supervisor? _____

To whom have you spoken: _____

When? Date(s): _____

What was the result of the discussion?

I (we) understand that the Governing Board may request from me (us) further information about this matter, and if such information is available to me (us), I (we) shall present it upon request.

I (we) certify under penalty of perjury that the foregoing is true and correct.

Executed this _____ day of _____, 20____, at Fontana, California

Signatures: _____

- Distribution: Original - Complaint Officer
 Copy - Site Administrator
 Copy - Complainant