CITIZEN’S COMPLAINT FORM

Name of Complainant: ________________________________
Address: ________________________________

Phone No.: Home________________ Work________________

TYPE OF COMPLAINT (Circle One)

School/District Programs Personnel Other

The date of the event or circumstances upon which this complaint is based: ________________________________

____________________________________________________________________________________________

The facts upon which this complaint is based are as follows: (attach additional sheets, if necessary)

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

I request that this complaint be resolved as follows: ________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that the foregoing is true and correct. This Declaration was executed on _____________ at _____________, California.

(Date) (City)

(Signature of Complainant) (Please Print Name)