



Parent/Student/Community Grievance Report

Level One Grievance

Any non-employee filing a grievance must fill out this form and submit it to either the principal of the school or the immediate supervisor of the area for which the complaint is being filed. All grievances will be processed in accordance with FNG(LEGAL) and (LOCAL) or GF(LEGAL) and (LOCAL).

Name: _____

Residence Address: _____

Telephone (Home): _____ (Work/Cell): _____

Today's Date: _____ Date of Incident/Concern: _____

Please list the names of any HISD students involved in the matter.

Name	Your Relationship to Child	Age	Grade	Teacher's Name

Please state the problem. (Specify which particular rule, administration regulation, Board policy, procedure, principle, or order was violated or applied in an inequitable manner. Provide and attach any and all documentation associated with this grievance.) Please give the details of the incident including all HISD personnel and all parties involved in the incident, using the back of this page if additional space is needed.

Please list all witnesses of the incident.

Please state the specific remedy sought to resolve this grievance.

Please attach a copy of all evidence in support of your grievance.

If you will be represented in pursuing your complaint, please identify that individual or organization representing you.

Name: _____

Address: _____

Telephone No.: _____

Complainant's Signature: _____ Date Submitted: _____

(Please return this Level One Grievance Form to the Campus Principal's Office or Director's Office.)