

FOLSOM CORDOVA UNIFIED SCHOOL DISTRICT
1965 Birkmont Drive, Rancho Cordova, CA 95742

(Step One: Prior to filling out this form, attempt to resolve complaint with person directly involved)

GENERAL COMPLAINT FORM (Step Two)

COMPLAINANT NAME: _____ DATE: _____

STUDENT NAME (if applicable): _____

ADDRESS: _____
Street City State Zip

HOME PHONE NUMBER: _____ WORK PHONE NUMBER: _____

SCHOOL/DEPARTMENT: _____

REGARDING PERSON/PROGRAM: _____

STATEMENT OF COMPLAINT: _____

SPECIFIC CORRECTIVE ACTION DESIRED: _____

Signature of Complainant

Date

Procedure/Timeline

- ❖ **Step One:**
 - Attempt to resolve complaint with person directly involved
- ❖ **Step Two:**
 - Present concern to Site/Program Administrator within 10 working days following initial attempt to resolve with person directly involved.
 - Site/Program Administrator attempts to resolve concern within 10 working days.
- ❖ **Step Three:**
 - If complaint is unresolved by the Site/Program Administrator, forward the complaint with Step One and Step Two documentation to the appropriate Instructional Assistant Superintendent for procedural review.