Parent Complaint Form

Re CWCS Employee

Any parent who wished to file a complaint regarding a CW employee complete this form in its entirety, and turn the completed form into the Human Resources Department within 15 days of the event(s) causing the complaint. All complaints will be processed pursuant to school policies. Please note all Education Specialist complaints go to the ES Advisor.

Parent Name:	Student Name:
Initial Date of the event or series	of events causing the complaint:
State the facts of your complaint, complaint. (List in detail):	including the individual harm alleged, as well as the person(s) involved in the
State what school policy, or law, S	State, or Federal, you allege has been violated:
Will you be represented in this cla	im?
If yes, please Identify the name o	the individual or organization:
Name:	Phone:
Address:	
Signature of Parent:	Date:

Number of additional pages attached:___