

**DODGELAND SCHOOL DISTRICT  
Board Policy Manual**

872 - Exhibit

**PUBLIC COMPLAINT FORM**

**Complainant's Name:** \_\_\_\_\_

**Complainant's Address:** \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

**Complainant's Phone:** (\_\_\_\_\_) \_\_\_\_\_  
(Area Code) (Phone)

Does your complaint involve a minor child?     Yes     No

If yes, please provide the following: Student Name: \_\_\_\_\_

Student Grade: \_\_\_\_\_

Does your complaint involve a Dodgeland School District Employee?     Yes     No

If yes, please provide the name of the employee: \_\_\_\_\_

Please provide a detailed description of the nature of your complaint. Use additional pages if necessary. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please sign and date this form and submit it to the appropriate building administrator.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)