FORM A

Roosevelt School District #66

Student Concerns, Complaints, and Grievances Form

Any student who has a grievance that their constitutional rights or equal access to programs have been violated or that they have been a victim of discrimination, harassment, bullying*, intimidation, or any other personal safety issue may lodge a complaint by completing this form. The form should be delivered to a school administrator.

* Bullying encompasses a variety of negative acts *repeated over time* that involve a real or perceived imbalance of power, with the more powerful child or group attacking those who are less powerful. Bullying can be *physical* (e.g. spitting, pushing, stealing, hitting, and kicking), *verbal* (e.g. name-calling, teasing, taunting, and making threats) and *psychological* (e.g. social exclusion, extortion, intimidation, spreading rumors, and manipulating social relationships). The United States Department of Justice

Student Name: _____ Date of Form Completion: _____

School: _____ Date Received by Administration: _____

Teacher/Team Name: _____ Grade: _____

1. What has happened or is happening that you believe is a grievance as listed above? Please list the names of the people who have committed this act.

2. When and how many times has it happened?

3. Where has this happened?

4. Who has seen/heard this happen?

5. What do you think should happen? What is the solution?

_____
Student Signature

_____
Staff Member Signature
(if student was assisted with form by a staff member)

_____
Date

_____
Date