## Arlington Independent School District Public Complaint Form <u>Level One</u>

Complete this form in accordance with District policy GF (LOCAL). Your complaint will be dismissed if it is submitted with incomplete information. Submit your Level One complaint via email to HREmployeeRelations@aisd.net

2. Address & Telephone Number\_\_\_\_\_

1. Name\_

3.	The date of the event or action that gave rise to this complaint
4.	A detailed factual description of all of the circumstance(s) that gave rise to this complaint. (Use additional pages if necessary)
	Explain specifically how you were harmed or injured by the facts that u provided in response to item 4 above.
6.	Identify and attach any documents upon which you will rely during the complaint process and explain what those documents will prove.

7.	The district wants to have all complaints resolved possible level. Explain your efforts to informal including whom you spoke with, when you received. If you did not attempt informal rexplanation why not.	lly resolve your complaint net, and the response you
	Identify the remedy you seek for this complaint. Iou want us to do in response to your complaint?	In other words, what do
Sig	gnature	Date Submitted
Na	ame, address, and telephone and fax number of rep	resentative, if any.

## Arlington Independent School District Public Complaint Form <u>Level Two</u>

Complete this form in accordance with District policy GF (LOCAL). Your complaint will be dismissed if it is submitted with incomplete information. Submit your Level Two complaint via email to HREmployeeRelations@aisd.net

1.	Name
2.	Address & Telephone Number
3.	Identify the date you received the Level One decision
4.	Attach a copy of the Level One decision and specifically identify the part(s) of the Level One decision that you factually or legally disagree with and want the superintendent's designee to review.
	Specifically state why you disagree with the part(s) of the Level One cision that you identified in response to number 4 above.
6.	Attach the documents you relied upon at Level One (if any) and explain how they support your position at response 4 and 5 above. Only those documents identified will be considered at Level Two.

Signature	Date Submitted
Name, address, and telephone and	fax number of representative, if any, if not
previously provided.	

## Arlington Independent School District Public Complaint Form <u>Level Three</u>

Complete this form in accordance with District policy GF (LOCAL). Your complaint will be dismissed if it is submitted with incomplete information. Submit your Level Three complaint via email to HREmployeeRelations@aisd.net

1.	Name
2.	Address & Telephone Number
3.	Identify the administrator who held the Level Two conference and provided the Level Two decision
4.	Identify the date you received the Level Two decision
5.	Attach a copy of the Level Two decision and specifically identify the part(s) of the Level Two decision that you factually or legally disagree with and want the Superintendent to review.
	Specifically state why you disagree with the part(s) of the Level Two cision that you identified in response to number 5 above.
7.	Attach the documents you relied upon at Level Two (if any) and explain how

they support your position at response 5 and 6above. Only those documents

identified will be considered at Level Three.

Signature	Date Submitted
Name, address, and telephone and previously provided.	I fax number of representative, if any, if not

## Arlington Independent School District Public Complaint Form <u>Level Four</u>

Complete this form in accordance with District policy GF (LOCAL). Your complaint will be dismissed if it is submitted with incomplete information. Submit your Level Four complaint via email to HREmployeeRelations@aisd.net

1.	Name
2.	Address & Telephone Number
3.	Provide the Level Three decision
4.	Identify the date you received the Level Three decision
of	Attach a copy of the Level Three decision and specifically identify the part(s) the Level Three decision that you factually or legally disagree with and ant the Board of Trustees to review.
	Specifically state why you disagree with the part(s) of the Level aree decision that you identified in response to number 5 above.
	Attach the documents you relied upon at Level Three (if any) and explain how they support your position at response 5 and 6above. Only those documents identified will be considered at Level Four.

Signature	Date Submitted
Name, address, and telephone and previously provided.	I fax number of representative, if any, if not