



Crook County School District

Where Students Dream, Learn, & Succeed

CROOK COUNTY SCHOOL DISTRICT

Code:	GBM-AR (2)
Adopted:	10/10/16
Revised/Readopted:	
Revised/Readopted:	
Original Code:	

STAFF COMPLAINT OR STAFF TITLE IX COMPLAINT FORM

Person Making the Complaint: _____

School or Department: _____

Phone & E-Mail Address: _____

Complaint is about (check one):



<input checked="" type="checkbox"/>	INDIVIDUAL CLASSROOM OPERATIONS AND PROCEDURES
<input type="checkbox"/>	ATHLETICS
<input type="checkbox"/>	INDIVIDUAL SCHOOL OPERATIONS, PROCEDURES OR PROGRAMS
<input type="checkbox"/>	SPECIAL EDUCATION OR TALENTED AND GIFTED PROGRAMS
<input type="checkbox"/>	EMPLOYMENT PRACTICES OR EMPLOYEE CONDUCT
<input type="checkbox"/>	SAFETY, INSURANCE, FACILITIES, MAINTENANCE, STUDENT TRANSPORTATION, FOOD SERVICE OR BUSINESS PRACTICES
<input type="checkbox"/>	CRIMINAL ACTS OR STATE AND FEDERAL STANDARDS

Description of Complaint:

Remedy Sought:

Signature _____

Date _____