

FORMAL COMPLAINT

MSAD # 46

Name of Complaint: _____

STATEMENT OF COMPLAINT:

RELIEF SOUGHT:

Signed _____

Date _____

Date complaint submitted Step 1 _____

Submitted to _____

Date complaint submitted Step 2 _____

Submitted to _____

Date answered in Step 3 _____

Submitted to _____

Date complaint submitted Step 4 _____

Submitted to _____

Date resolved or dropped _____

Original to Complaint Manager

Duplicate to Complainant

LEGAL REF: _____

DATE ADOPTED 1/4/95