

Form Title: **Grievance Form for Complaints of Discrimination  
or Non-Compliance with Federal or State Regulations  
Requiring Non-Discrimination**

Form #102.1F1

I \_\_\_\_\_, am filing this grievance because:

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(Attach additional sheets if necessary)

Describe incident or occurrence as accurately as possible:

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(Attach additional sheets if necessary)

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Signature: \_\_\_\_\_

Address: \_\_\_\_\_

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Phone Number: \_\_\_\_\_

If student, name: \_\_\_\_\_

Grade level: \_\_\_\_\_

Attendance Center: \_\_\_\_\_

Approved: 7/25/05

Reviewed: 10/22/12; 11/24/14

Revised: