{{Full_District_Heading}}

COMMUNITY RELATIONS

4120F

Concern You Would Like Addressed (Please keep your presentation to one sheet. Thank you.)	
Name:	Date:
Mailing Address:	
Phone Number(s):	
Subject:	
Problem:	
Examples that demonstrate the problem:	
Results:	
Suggested Solutions:	

Response Date:	Person Responding:
{{Full_District_Name}}	
Response to Concern	
If the complaint pertains to sexual harassm remanded to the Title IX Coordinator to ad	nent or sexual misconduct, the concern should be ldress in accordance with Policy 3085.
Person Responding:	Response Date:
Method used to communicate response:	
Actions taken to investigate concern:	
People contacted in gathering information	upon which to make decision:
Findings of the investigation:	
Decision:	
Results of communicating the decision:	

Signature	
Signature	
Signature	