

## **WEST BONNER COUNTY SCHOOL DISTRICT #83**

Administrative Office 134 Main Street, Priest River, ID 83856 (208)448-4439 • www.sd83.org

## PATRON COMPLAINT FORM

4120F

FATRON COMPLAINT FORM	4120F
To: Superintendent or Designee	
From: Name (s):	
Address (es):	
Telephone Number (s):	
Name of employee or issue of the complaint:	
Nature of the complaint (this should be a description in your own words of the including all names, issues, dates and places necessary for a complete understa complaint.	grounds,
Provide evidence that you have attempted to resolve this complaint at the lowe (i.e. calling the bus driver, meeting with the teacher, dates and brief summary etc.):	

	at you have attempted to e Transportation Directo cussions, etc.)		1	1 .
What remedy or res	ults are you seeking?			
provide evidence th	nt can be addressed by that attempts have been many the complain	ade to resolve the	e complaint at	the lower level (s). If
	hat the School District n if such information is av	• •		
person (s) against w	and that a copy of this conhom this complaint is bound in writing to this conhom this conhom the conhom that a conhom that a conhom the conhom that a conhom that a conhom that a copy of this copy of	eing made, and h	e/she (they) wi	ill be given the
complaint, such hea	and that if a hearing is hearing will be held in Execute be informed of the time,	cutive Session wi	th the press an	nd public excluded,
I (We) certify under	penalty of perjury that	the foregoing is t	rue and correc	t.
Executed this	day of	, 20	, at	, ID.
	Signature (s):			

(You may use additional pages of your own paper to describe your complaint more fully if you desire.)