

**Grievance Procedure, Level II - Formal Grievance Form**

Name:

Phone #:

E-mail:

Description of Grievance, including identity of involved parties:

Lab policy, rule, regulation, policy, practice, charter, mission, vision or applicable regulation or law that was violated:

Specific Relief Sought:

Steps Taken during Level I of Grievance Procedure:

I certify that I have read the Grievance Procedure, I engaged in the Level I process with good faith, and the information I have provided in this form is true, correct, and complete to the best of my knowledge and belief.

Community Member: \_\_\_\_\_ Date: \_\_\_\_\_

Submit this form to the Executive Director, per the Grievance Procedure, Level II. You should receive a response within 10 school days.