



Willis Independent School District

612 N. Campbell St • Willis, TX 77378 • 936-856-1200



LEVEL ONE – Community Member Complaint Form

To file a formal complaint, please fill out this form completely and submit it by hand delivery, fax or U.S. mail to the appropriate administrator within the time established in GF (LOCAL). All complaints will be heard in accordance with GF(LEGAL) and (LOCAL) or any exceptions outlined therein.

Complainant Name _____

Address _____

Phone _____ Email _____

If you will be represented in voicing your complaint, please identify the person representing you.

Name _____

Address _____

Phone _____ Email _____

Please describe the decision or circumstances causing your complaint (**give specific factual details**).

What was the date of the decision or circumstances causing your complaint? _____

Please explain how you have been harmed by this decision or circumstance.

Please describe any efforts you have to resolve your complaint informally and the responses to your efforts. With whom did you communicate? On what date?

Please describe the outcome or remedy you seek for this complaint.

Complainant Name (Printed)	Complainant Signature	Date
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Complainant Representative (Printed)	Complainant Representative Signature	Date
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Date of filing _____

Complainant, please note:

A complaint form that is incomplete in any material way may be dismissed, but may be refiled with all the required information, if the refileing is within the designated time for filing a complaint.

Attach to this form any documents you believe will support the complaint; if unavailable when you submit this form, they may be presented no later than the Level One conference. Please keep a copy of the completed form and any supporting documentation for your records.