

Series 500 – Student Personnel

Policy Title: STUDENT GRIEVANCE FORMS

Policy Code No. 502.9F3

School _____

Grievance # _____

NEWTON COMMUNITY SCHOOL
GRIEVANCE FORM

Copies to: Hearing Officer
 Head of Household
 Actor

On _____ 20____ I think _____
 (date)

wrongfully interpreted, applied, or violated a Board Policy or Administrative Rule or Regulation causing me, _____, to feel the need for formal hearing and clarification of my position. I have discussed my case with _____ and here present my formal grievance to _____ for resolution.

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State briefly the circumstances which caused this grievance.

(List supportive witnesses, names actions, dates, events, etc.)

I will be represented by:

_____ Aggrieved

My signature here indicates that I have read and understand the above statement.

Student Facilitator

Aggrieved

Head of Household

Series 500 – Student Personnel

Date of Adoption
Review Date
Revision Date

Legal Ref.:

Cross Ref.: