

**CLOVIS UNIFIED
SCHOOL DISTRICT**

**COMMUNITY RELATIONS
UNIFORM COMPLAINT PROCEDURES**

**UNIFORM COMPLAINT PROCEDURES:
COMPLAINT FORM**

The Uniform Complaint Procedures: Complaint Form is set forth on the following page and shall be used in accordance with Board Policy and Administrative Regulation No. 1312.3.

Reviewed: 01/14/2009, 10/14/2009, 11/13/2013

Amended: 09/22/1999, 02/22/2006, 01/23/2008, 02/22/2008, 06/15/2021 (EXH 9208(1))
renumbered as EXH 1312.3(1))

Doc# 41667-4 (06/2021, None)



Date Received:

EXHIBIT NO. 1312.3(1)
UNIFORM COMPLAINT PROCEDURES:
COMPLAINT FORM

- 1. Name of Complainant: _____ Date Filed: _____
- 2. Address: _____ City: _____ Zip: _____
- 3. Home Phone: _____ Other Phone: _____ Email: _____
- 4. I wish to complain against (person, program, or activity): _____

- 5. Location: _____ Date of incident: _____
- 6. Please specify the nature of your complaint and list specifics of what, when, where, how and who was there (attach additional pages if necessary):

- 7. Names and addresses and/or other contact information for witnesses or persons who can provide more information regarding this complaint:

- 8. Suggestions for an appropriate remedy or resolution of this complaint:

- 9. I certify under penalty of perjury that the foregoing statements and attachments are true and correct.

Signature of Complainant: _____ Date: _____

**Please file this complaint form with the appropriate school principal/department head or at the District Office,
1450 Herndon Avenue, Clovis, CA 93611-0567; telephone 559-327-9000**