

STUDENT PRIVACY COMPLAINT FORM

Date of Complaint: _____

Name of Complainant: _____

Contact Information for Complainant: _____

Name of Student: _____

Relationship to Student: _____

Student School Name and Teacher Name: _____

Date(s) of Incident(s): _____

Description of Incident(s) or Issue(s): _____

Name of Faculty Member(s) Contacted: _____

Name(s) of Involved Person(s): _____

Steps taken to remedy Complaint: _____

Date of submission of Complaint form to Principal: _____