

Office Use Only

Date Received:

## Learning by Design Charter School Parent/Student/Stakeholder Complaint Form

Date:		
Name of person submitting co	omplaint:	
Relationship with School (e.g.	parent, student):	
Submitting complaint on beha	ılf of (if applicable):	
Phone Number:	Email:	
Date of Incident:		
Persons Involved:		
Were there any witnesses? If y	/es, who?	
investigated. You may continu paperwork.	your complaint to allow the matter to be fully e on a separate sheet of paper or attach additional	

Received by: