File: KL-F

## PUBLIC COMPLAINT FORM - GENERAL

Complainant's Name	e:	Date	:
Address:			
Home Phone:		Work Phone:	
This applies <u>to</u> (Spe SBO	cify Location):KGHS _	_KGMSKGES _	_PES _SES _
Other:			
Relation to the School Division (Check all that apply):  Parent/Guardian  King George Resident King George County School Employee  Please explain the specific nature of your complaint:			
What suggestions d	o you have to solve the pro	oblem?	
	(Use additional sheets	as necessary)	
	Signature of C	omplainant	

Parents/Guardians with a currently enrolled student: Please give the completed form to the school principal (Building Administrator).

King George residents without a currently enrolled student: Please give the completed form to the Superintendent.