

Astoria School District 1C

Code: **KL-AR(3)**
Revised/Reviewed: 3/08/17
Orig. Code(s): KL-AR(2)

Complaint Findings Report

This report is filed as a result of a complaint registered on _____
(Date)

by _____
(Complainant's Name)

Description of findings (include recommendations and action, if any):

The above is a complete and accurate report of the findings resulting from an investigation of the complaint filed by the complainant named above. Should complainant not be satisfied with above findings, please feel free to contact the superintendent.

Signature of Investigating Administrator Date

Disposition of Complaint and Findings Report:

____ Personnel File
____ Working File

(If disposition is in personnel file, the affected employee must sign acknowledging such disposition. The employee may make a written response which will be included in the personnel file.)

Signature of Affected Employee Date

Copies to be attached to the complaint form and sent to:

White - Superintendent Pink - Complainant Yellow - Employee Goldenrod - Principal