

**Grievance Form for Complaints of General (Non-Sex) Discrimination or Non-Compliance with Federal or State Regulations Requiring Non-Discrimination**

I, \_\_\_\_\_, am filing this grievance because

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(Attach additional sheets if necessary)

Describe incident or occurrence as accurately as possible:

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(Attach additional sheets if necessary)

Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

If student, name \_\_\_\_\_ Grade Level \_\_\_\_\_

Attendance center \_\_\_\_\_

Name of Individual Alleging Discrimination or Non-Compliance

Name \_\_\_\_\_

Grievance Date \_\_\_\_\_