EAST TROY
COMMUNITY SCHOOL DISTRICT

CITIZEN COMPLAINT FORM

Today's Date: _____

Submitted By: _____ Phone Number: _____

Address: _____

Suggestion/Statement of Concern:

Specific Facts Leading to Expression of Suggestion/Concern:

Action or Resolution which is Sought:

Complainant's Signature: _____ Date Filed: _____

Signature of Person Receiving Complaint: _____ Date Received: _____