

SAN CARLOS CHARTER LEARNING CENTER  
MISCELLANEOUS COMPLAINT FORM

Your Name \_\_\_\_\_

Address \_\_\_\_\_

E-Mail Address \_\_\_\_\_

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

1. Identify the area in which the complaint is most appropriate:

\_\_\_\_\_ Policy    \_\_\_\_\_ Program    \_\_\_\_\_ Operations    \_\_\_\_\_ SCCLC Employee

If this complaint concerns a SCCLC employee or employee(s), please identify the employee(s).

\_\_\_\_\_

2. Date of the incident or action complaint about: \_\_\_\_\_

3. Is the complaint on behalf of:

\_\_\_\_\_ a student or group of students?

\_\_\_\_\_ a parent/guardian or community member or group?

\_\_\_\_\_ an SCCLC employee or group of employees?

4. Please describe the complaint. Include names of persons involved and dates and locations of the specific events you describe. If necessary, attach additional pages.

\_\_\_\_\_  
\_\_\_\_\_

5. Please list SCCLC personnel you contacted about this complaint.

\_\_\_\_\_

What was the result of your discussion? \_\_\_\_\_

\_\_\_\_\_

- 6.

\_\_\_\_\_

Your Signature

\_\_\_\_\_

Date

This complaint form will be forwarded to the appropriate SCCLC individual, who will contact you. If the complaint concerns an employee, SCCLC will inform the employee(s) involved that a complaint has been made and the nature of the complaint. The information you provide will be kept confidential except as necessary to investigate your complaint.