



UNIFORM COMPLAINT FORM

It is the intent of the Board of Directors to provide a process for the community to address complaint(s) to appropriate personnel and to receive a prompt and well-reasoned response without fear of retaliation. It is also the intent of the Board to protect personnel from unfair and unfounded accusations and to resolve any complaints swiftly.

GCC Board policies related to complaints about discrimination, programs, and materials all require that efforts be made to resolve complaints directly with the person involved prior to filing a formal complaint.

Complainant/Name: _____ Address: _____

Home/Cell Phone: _____ Work Phone: _____

Student Name (if applicable): _____ School Name: _____

Person, school, or department your complaint involves:

Type of Complaint:

- | | | | |
|--|---|---|------------------------------------|
| <input type="checkbox"/> Materials | <input type="checkbox"/> Student Fees | <input type="checkbox"/> Program | <input type="checkbox"/> Personnel |
| <input type="checkbox"/> Military Families | <input type="checkbox"/> Foster/Homeless Youth | <input type="checkbox"/> Retaliation | <input type="checkbox"/> Lactation |
| <input type="checkbox"/> Elementary Physical Education Minutes | <input type="checkbox"/> 9-12 Grade Assignment | <input type="checkbox"/> SexualHarassment | |
| <input type="checkbox"/> Harassment / Intimidation / Bullying | <input type="checkbox"/> Local Control & Accountability Plan (LCAP) | | |
| <input type="checkbox"/> Other: _____ | | | |

Details of the complaint (provide additional pages as needed):

Individuals with information about the circumstances of the complaint:

Details of the attempt to informally resolve the complaint (additional pages as needed):

Specific remedy sought (additional pages as needed):

Please file this complaint at the GCC Central Office:

Gateway Community Charters
5112 Arnold Ave., Suite A
McClellan, CA 95652

Or via email:

GCC-Info@GCCCharters.org
Morri.Elliott@GCCCharters.org

NOTE: A copy of the complaint form will be given to the employee to allow the employee to respond to the complaint.

I declare under penalty of perjury under the laws of the State of California, that I have made true, correct and complete answers and statements on this complaint form and/or any attachment to this complaint form.

Signature

Date

Received by

Date

Gateway Community Charters