## Lynden School District No. 504 BOARD POLICY

Policy: 4220F

Program or Staff Complaint Form			
	Contact Information		
Na	Name : Date	Date:	
Ad	Address:		
Phone: Email address:			
l.	. Staff Member(s) or Program(s) that are the subject of your coname of school if applicable:	mplaint. Include	
Yo	You are filing this complaint on behalf of:		
_	yourself your childanother student	a group	
III.	I. Have you attempted to address your complaint through the in process before initiating a formal complaint? Yes	nformal complaint No	
V.	tails Statement of Complaint ease describe the nature of your complaint. Include as much detail as possible luding dates and whom you have been in contact with regarding this complaint. ach additional pages if needed.		
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Adopted: 05/10/2023