

Indian River School District Formal Complaint for Reporting Violations Of The District's Policies		
1. Name of aggrieved person (Mr., Mrs., Miss, Ms.)	Home Phone ()	Business Phone ()
Street Address (city, state and zip code)	If you wish to file a confidential complaint, please indicate so by marking here: <input type="checkbox"/> Yes, this complaint is confidential. <input type="checkbox"/> No, this complaint is NOT confidential.	
2. Against whom is this complaint being filed? Name (last name, first name, middle initial)		
School or District office where this individual works		
Name and place of employment of other individuals (if any) you believe violated the policies in this case:		
3. What did the person(s) against whom the complaint was filed do? Additional details may be submitted on an attachment.		
4. When did these acts occur? Please give the most recent date first if several dates are involved.		
5. Who witnessed these acts?		
6. Where did these acts occur?		
Signature: _____ Date: _____		

You may file this complaint with the Principal or Assistant Principal of the school where the person you're filing this complaint against works. You may also file a copy of this complaint with the Director of Personnel or Assistant Superintendent by mailing it to either of them at the address below:

Indian River School District
31 Hosier Street Selbyville, DE 19975