Tonasket School District Complaint Against a School District Staff Member

To:	Superintendent Tonasket School District	
Date:		
	e and Address of Person(s) Initiating the Complaint:	
Name:		
	ess:e Number:	
	e of School District Staff Member(s) Against Whom the	
Descri	ription of Complaint:	
(You n	may use additional pages to describe your complaint	more fully if you so desire.)
What h	has come out of the informal process:	
Solutio	ion(s) Sought by the Person(s) Initiating the Complain	t:
In initi 1.	tiating this complaint, I (we) understand that: The School Board may request further information available, I (we) shall present it upon request.	about the complaint, and if such information is
2.		be given, by the superintendent, to the district staff d. The staff member(s) shall be given the opportunity (we) shall be provided an exact copy of such
Signatu	ture(s) of Person(s) Initiating this Complaint:	
Receiv	ved in the District Office	via
Dıstrib	bution of Exact Copies of Form 4220-F1, including at	
_		
_		Date