PUBLIC COMPLAINTS GF (EXHIBIT)

The forms on the following pages are provided to assist the District in processing complaints from members of the public:

Exhibit A: Public Complaint Form — Level One — 2 pages

Exhibit B: Response to Level One Complaint — 1 page

Exhibit C: Level Two Appeal Notice — 1 page

Exhibit D: Response to Level Two Appeal — 1 page

Exhibit E: Level Three Appeal Notice — 1 page

Exhibit F: Board's Response to Level Three Appeal — 1 page

DATE ISSUED: 3/30/2006

UPDATE 28

EXHIBIT A

PUBLIC COMPLAINT FORM — LEVEL ONE

To file a formal complaint, please fill out this form completely and submit it by hand delivery, fax, or U.S. mail to the appropriate administrator within the time established in GF(LOCAL). All complaints will be heard in accordance with GF(LEGAL) and (LOCAL) or any exceptions outlined therein.

will be represented in voicing your complaint, please identify the person rep g you.
g you.
ss
none number ()
e describe the decision or circumstances causing your complaint (give spec al details).
was the date of the decision or circumstances causing your complaint?
e explain how you have been harmed by this decision or circumstance.

PUBLIC COMPLAINTS GF (EXHIBIT)

7.	Please describe any efforts you have made to resolve your complaint informally and th responses to your efforts.			
	With whom did you communicate?			
	On what date?			
8.	Please describe the outcome or remedy you seek for this complaint.			
Sigi	nature of complainant			
Sigi	nature of complainant's representative			
Dat	e of filing			

Complainant, please note:

A complaint form that is incomplete in any material way may be dismissed, but may be refiled with all the required information if the refiling is within the designated time for filing a complaint.

Attach to this form any documents you believe will support the complaint; if unavailable when you submit this form, they may be presented no later than the Level One conference. Please keep a copy of the completed form and any supporting documentation for your records.

EXHIBIT B	
RESPONSE TO LEVEL	ONE COMPLAINT
	(date)
	(name of complainant)
	(address of complainant)
	-
Dear:	
Having considered the complaint we discussed in (date), I have decided on	
[Note: When preparing the letter, include only or	ne of the following sentences.]
For the following reasons, I am unable to provide	the remedy you seek:
I will take the following actions to grant the remed	dy you seek for your complaint:
Although I am unable to provide the full remedy y following actions to provide a partial remedy:	ou seek for your complaint, I will take the
	(signature of appropriate administrator)
Complainant, please note:	
To appeal this response, you must file a written re istrator within the time limits set in GF(LOCAL).	

DATE ISSUED: 3/30/2006

UPDATE 28

EXHIBIT C

LEVEL TWO APPEAL NOTICE

To appeal a Level One decision, or the lack of a timely response after a Level One conference, please fill out this form completely and submit it by hand delivery, fax, or U.S. mail to the Superintendent or designee within the time established in GF(LOCAL). Appeals will be heard in accordance with GF(LEGAL) and (LOCAL) or any exceptions outlined therein.

1.	. Name					
2.	Address					
	Telephone number ()					
3.	If you will be represented in voicing your appeal, please identify the person representing you.					
	Name					
	Address					
	Telephone number ()					
4.	To whom did you present your complaint at Level One?					
	Date of conference					
	Date you received a response to the Level One conference					
5.	Please explain specifically how you disagree with the outcome at Level One.					
6.	Attach a copy of your original complaint and any documentation submitted at Level One.					
7.	Attach a copy of the Level One response being appealed, if applicable.					
Sigı	nature of complainant					
Sigi	nature of complainant's representative					
Dat	e of filing					

DATE ISSUED: 3/30/2006

UPDATE 28

EXI	HIB	ΙT	D

RESPONSE TO LEVEL TWO APPEAL
(date)
(name of complainant)
(address of complainant)

Dear:
Having considered the appeal you presented at Level Two on (date), have decided on the following response:
[Note: When preparing the letter, include only one of the following sentences.]
I am unable to grant your appeal. I will uphold the decision made at Level One by (name) and communicated to you in the Level One response.
I wish to grant your appeal and have instructed (name) to find a resolution in keeping with the remedy you seek.
Although I am unable to fully grant your appeal, I have instructed (name) to take the following actions as a partial remedy to your complaint:
Superintendent (or designee)
Complainant, please note:
To appeal this response, you must file a written notice of appeal with the appropriate administrator within the time limits set in GF(LOCAL). The necessary forms are available at during regular business hours.

DATE ISSUED: 3/30/2006

UPDATE 28

EXHIBIT E

LEVEL THREE APPEAL NOTICE

To appeal a Level Two decision, or the lack of a timely response after a Level Two conference, please fill out this form completely and submit it by hand delivery, fax, or U.S. mail to the Superintendent or designee within the time established in GF(LOCAL). Appeals will be heard in accordance with GF(LEGAL) and (LOCAL) or any exceptions outlined therein.

	Name				
	Address				
	Telephone number ()				
	If you will be represented in voicing your appeal, please identify the person representing you.				
	Name				
	Address				
	Telephone number ()				
	To whom did you present your appeal at Level Two?				
	Date of conference				
	Date you received a response to the Level Two conference				
	Please explain specifically how you disagree with the outcome at Level Two.				
	Do you want the Board to hear this appeal in open session? If so, the Board will consider your request; however, you may not have a legal right under the Texas Open Meetings Act to require a meeting in open session.				
	Attach a copy of your original complaint and any documentation submitted at Level One and a copy of your Level Two appeal notice.				
	Attach a copy of the Level Two response being appealed, if applicable.				
l	ature of complainant				
l	ature of complainant's representative				
	e of filing				

DATE ISSUED: 3/30/2006

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PUBLIC COMPLAINTS GF (EXHIBIT)

EXHIBIT F	
BOARD'S RESPONSE	TO LEVEL THREE APPEAL
	(date)
	(name of complainant)
	(address of complainant)
Dear:	
Having heard the presentation of your appeal at Level Three, the Board took the following action at its meeting on (date):	
[Note: When preparing the letter or annound only one of the following sentences.]	cing the decision at the Board meeting, include
We have denied the appeal and have upheld designee) at Level Two.	the decision made by the Superintendent (or
We have granted the appeal and have instru keeping with the remedy you seek.	cted the Superintendent to find a resolution in
We have partially denied and partially grante tendent as follows:	ed the appeal and have instructed the Superin-
Sincerely,	
President of the Board of Trustees	
	SD

DATE ISSUED: 3/30/2006

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