

Incident/Complaint Form

The purpose of the Incident/Complaint Form is to document any behaviors or incidents of
concern on campus.

Step	1: Have	you had	an c	pportuni	ty to	discuss	this	matter	with a	a repre	esentat	ive f	rom
	your	r student	's site	e/progran	n?								

Name of Person Completing Form:

Date of Incident:

	Please select charter:
	☐ River Springs
	☐ Empire Springs
	☐ Inland Empire Springs
	☐ Harbor Springs
,	☐ Citrus Springs
f	☐ Vista Springs
	☐ Pacific Springs

Please write a description of what occurred. Be as specific (name(s), date(s), etc.) as possible. When finished, please sign and date this report and return it to a school administrator.

Date Form Completed:

If more space is needed, please attach additional page(s).

What is the best phone number for the Principal to reach you (if needed):					
Signature:		Date:			
Office Use Only	Received By:	Date Received:			