Red Lake County Central ISD #2906
Discipline Complaint Form

Date of Complaint:_____

Name of Person Completing Form:_____

Email Address_____Cell Phone_____

Student Name_____Grade_____

Applicable Governing Discipline Documents

- Pupil Fair Dismissal Act
- School District Discipline Policy

Describe your complaint(s) and/or allegation(s) regarding improper implementation of the Minnesota Pupil Fair Dismissal Act and/or the school discipline policy or how the procedures in these two documents are being discriminately applied. Attach separate document if needed.

List below any other information you would like the District to consider:

Signature_____Date:_____

For Administrative Use (Notes):

Date Received:_____

Assignment of Investigator:_____

Date Investigation Complete:_____

Notice of Decision sent to Complainant:_____

Data Practices Act Compliance Conducted:_____

Corrective Action Required:_____

Corrective Action Taken:_____

Matter Closed:_____

Data Practices Act Compliance Conducted:_____