

Murfreesboro City Schools
2552 South Church Street, Murfreesboro TN 37127
Phone (615) 893-2313 **Fax** (615) 893-2352
cityschools.net



Step 1: Parent/Student Complaint Form

To file a formal complaint under Administrative Directive 1.500.1, please complete this form and submit to your child's school principal. You must submit this form within fifteen (15) school days from the date of the incident that is the subject of the complaint. You may also submit any documentation that supports your complaint.

Student/Parent Information

Student Name: _____ Grade: _____

School attending: _____

Parent/Guardian Name: _____ Phone: _____

Relation to Student: Parent Legal Guardian Other: _____

Address: _____

E-mail: _____

Complaint Information

Location of Incident: _____ Date(s) of Incident: _____

Describe the incident or provide a statement of your concern:

Describe the corrective or remedy you are seeking:

By signing below, you affirm that you are the individual named on this form and you are entitled to submit a complaint on behalf of the student named above.

Parent/Guardian Signature

Parent/Guardian Name

Date