

<b>Category:</b>  <b>4000 COMMUNITY RELATIONS</b>	<b>Policy Number:</b>  <b>4220</b>
<b>Policy Title:</b>  <b>Patron Concerns</b>	<b>Effective Date:</b>  <b>October 16, 2013</b>

**Patron concerns should be referred to the appropriate administrator promptly. Administrators and board members should use a District Action Form for Patron Concerns, Form (4220f2), when referencing patron concerns.**

**The patron should fill out a Patron Concern Form (4220f1) and may attach their letter of concern.**

**The administrator must:**

1. Ask the concerned patron to use a Patron Concern Form (4220f1) (with letter of explanation attached, if needed). Employees or board members may use "District Action Form for Patron Concerns, Form 4220f2);
2. Arrange a meeting with the patron (and employee/teacher, if necessary);
3. Seek resolution to the problem by helping concerned patrons make a plan;
4. Respond promptly and in writing to a patron's concern;
5. Notify an employee promptly if a patron concern involves him/her;
6. Notify the employee before a patron concern is placed in the employee's file or considered in the employee's evaluation; and,
7. Keep a copy of all patron concerns and letters on file.

If a patron concern is not resolved at the building level, a patron may refer the concern to the superintendent. When a concern is not resolved at the building or superintendent level, the complaint may be brought in writing to the Board of Trustees.

Reference: Form 4220f1, "Patron Concern Form"  
Form 4220f2, "District Action Form for Patron Concerns"

<b>Category:</b>  4000 COMMUNITY RELATIONS	<b>Procedure or Form Number:</b>  4220f1
<b>Policy Title:</b>  Patron Concerns	<b>Effective Date:</b>  October 16, 2013

**PATRON CONCERN FORM**

Please follow these guidelines so we may address your concern efficiently. Most concerns occur at a specific school building and are handled by the building principal when attached to this form. Please follow these steps:

1. Attach this form to your letter of concern and give it to the appropriate administrator.
2. Discuss a resolution with the administrator. Keep a copy once the administrator signs that he/she has received it. You may request a written response.
3. If your concern is not resolved, you may appeal to the next level, i.e., superintendent. When a concern is not resolved at the building or superintendent level, the complaint may be brought in writing to the Board of Trustees.

Patron Name(s) \_\_\_\_\_ Phone: \_\_\_\_\_

If this concern regards an employee, have you discussed the concern with him/her? Yes \_\_\_ No \_\_\_

Does this concern a district policy? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you attached a letter describing your concern? Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, please attach)

Briefly explain your concern here: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signed by Patron(s): \_\_\_\_\_ Date Made: \_\_\_\_\_

Signed by Administrator: \_\_\_\_\_ Date received: \_\_\_\_\_

(Copies should be made for Patron)

**TO BE COMPLETED ONLY IF APPEAL IS NECESSARY:**

Was a letter of response sent by the principal? Yes \_\_\_\_\_ Date \_\_\_\_\_ No \_\_\_\_\_

Was a resolution discussed? Yes \_\_\_\_\_ Date \_\_\_\_\_ No \_\_\_\_\_

Please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signed by Patron(s) \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

<b>Category:</b> 4000 COMMUNITY RELATIONS	<b>Procedure or Form Number:</b> 4220f2
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<b>Policy Title:</b> Patron Concerns - District Action Form	<b>Effective Date:</b> October 16, 2013
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**FORM FOR EMPLOYEE RECEIVING  
PATRON CONCERN**

**RECEIVED BY:** \_\_\_\_\_ **DATE RECEIVED:** \_\_\_\_\_  
**FROM PATRON:** \_\_\_\_\_ **PHONE NUMBER:** \_\_\_\_\_  
**RECEIVED VIA:** \_\_\_\_\_ Letter (Attached) \_\_\_\_\_ Phone Call \_\_\_\_\_ In Person \_\_\_\_\_

**CONCERN:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AS APPLICABLE:**

**Referred To:** \_\_\_\_\_ **Date Referred:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYEE INITIAL:** \_\_\_\_\_

**ACTION TAKEN:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SUPERVISOR INITIAL:** \_\_\_\_\_ **ADMINISTRATOR INITIAL:** \_\_\_\_\_

**IF APPLICABLE:**

**COMMENTS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SUPERINTENDENT INITIAL:** \_\_\_\_\_