## **Trout Creek School District #6**

## **Grievance Reporting Form**

School		Date
Grievant's name		
and the second s		
► Date(s), time(s), and place	(s) the incident(s) occurred.	
Were other individuals inv If so, name the individual(s) and ex	volved in the incident(s)?  ves xplain their roles.	
Did anyone witness the includes of the include of the best of the	cident(s)?  yes  no	
Did you take any action in if yes, what action did you take?	response to the incident?  uges	□ no
	- Annual Control of the Control of t	
What remedy are you seek	cing?	توح
Signature of Grievant		