



HUMAN RESOURCES  
155 Bardin Road, Salinas, CA 93905  
OFFICE (831) 753-5700 • FAX (831) 753-5278  
[arturo.duran@alisal.org](mailto:arturo.duran@alisal.org); [www.alisal.org](http://www.alisal.org)

Arturo C. Duran  
District Uniform Complaint Officer  
Assistant Superintendent of Human Resources

## UNIFORM COMPLAINT FORM

### Complaint Contact Information (Complainant)

<b>Name of Person/Organization (Complainant):</b>  	<b>Date and Time Complaint Submitted:</b>  Date: _____  Time: _____
<b>Relationship to the Student—Check One:</b>  <input type="checkbox"/> Parent or Guardian <input type="checkbox"/> Parent's Attorney <input type="checkbox"/> School District/State Agency Representative <input type="checkbox"/> Other Please specify _____	
<b>Mailing Address of Complainant:</b>  	<b>Telephone:</b> Day: _____ Work: _____ Evening: _____
<b>What is the best time to contact you (the complainant) and at what number?</b>  	
<b>Date and time of occurrence resulting in complaint:</b>  	
<b>Location related to concern: (School Name, Address, and Room Number or Location):</b>  	

