

## ${\bf Quarterly\, Uniform\, Complaint\, Form}$

[Education Code 35186]

Distri	ct:			
Perso	n completing this form: _			
Title:				
	erly Report Submission I	Date: (check one) April July 3	30, 2015 (Jan-Mar 2015) 31, 2015 (Apr-Jun 2015) per 31, 2015 (Jul-Sep 201 ary 31, 2016 (Oct-Dec 201	5)
Date 1	for information to be repo	orted publicly at govern	ning board meeting:	
Please	e check the box that appl	ies:		
	Complaints were filed with schoo following chart summarizes the n  Area of Total # of			
	Complaint	Complaints	" Resolved	" CIII esoived
	Textbooks and Instructional Materials			
	Teacher Vacancy or Misassignment			
	Facilities Conditions			
	TOTALS	0	0	0
			,	,
		Print Name of Dis	trict Superintendent	
		Signature of Dist	rict Superintendent	
		Г	Date	