



## Quarterly Uniform Complaint Form

[Education Code 35186]

District: \_\_\_\_\_

Person completing this form: \_\_\_\_\_

Title: \_\_\_\_\_

Quarterly Report Submission Date: *(check one)*

- April 30, 2014 (Jan-Mar 2014)
- July 31, 2014 (Apr-Jun 2014)
- October 31, 2014 (Jul-Sep 2014)
- January 31, 2015 (Oct-Dec 2014)

Date for information to be reported publicly at governing board meeting: \_\_\_\_\_

Please check the box that applies:

- No complaints were filed with any school in the district during the quarter indicated above.
- Complaints were filed with schools in the district during the quarter indicated above. The following chart summarizes the nature and resolution of these complaints.

Area of Complaint	Total # of Complaints	# Resolved	# Unresolved
<b>Textbooks and Instructional Materials</b>			
<b>Teacher Vacancy or Misassignment</b>			
<b>Facilities Conditions</b>			
<b>TOTALS</b>			

\_\_\_\_\_

Print Name of District Superintendent

\_\_\_\_\_

Signature of District Superintendent

\_\_\_\_\_

Date

Please return completed form to Eloísa Mendoza, Williams Coordinator  
 CCCOE – 77 Santa Barbara Rd. Pleasant Hill, CA 94523  
 FAX: (925) 942-3280 E-MAIL: emendoza@cccoe.k12.ca.us