



**Compton Unified School District**  
**Human Resources & Employee Development**  
*Office of Employee Relations*

**CLASSIFIED PERSONNEL COMPLAINT FORM**

Name of  
Complainant:

_____	_____	_____	_____
Last	First	Job Title	Work Location

Contact  
Numbers

_____	_____	_____	_____
Home	Cellular	Work	E-mail

**INFORMAL LEVEL**

Date of meeting: \_\_\_\_\_ Who attended: \_\_\_\_\_

Meeting Results: \_\_\_\_\_  
 \_\_\_\_\_

Date cause of complaint occurred: \_\_\_\_\_. State specific provision of law, district policy, or regulations alleged to have been violated by number, letter code, section, (if known), or other reason for complaint:

Who are you alleging has violated your rights?

_____	_____
Name	Title

Please answer the following questions:

When and where did the violation occur?

_____	_____
Date / Time	Location

Where there any witnesses?

Yes      No

If you answered yes, who?

\_\_\_\_\_

Name / Title

Briefly describe what occurred. (Attach additional pages as needed)


501 South Santa Fe Ave., Compton, CA 90221 . (310)639-4321 Extension 55197

**\*This form is to be used for any complaint which does not involve an Educational Program**

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

---

---

---

Why do you feel this happened?

---

---

Corrective action requested.

---

---

\_\_\_\_\_  
Signature of Complaint

\_\_\_\_\_  
Date

Did you receive a copy of the Board Policy Complaint Procedure:    Yes    No  
If you answered yes, when? \_\_\_\_\_

501 South Santa Fe Ave., Compton, CA 90221 . (310)639-4321 Extension 55197

**\*This form is to be used for any complaint which does not involve an Educational Program**

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

**Complaint received by:**

\_\_\_\_\_  
Name Title Date

Accused notified by:

\_\_\_\_\_  
Name Title Date

**COMPLAINT RESPONSE FORM**

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

From: \_\_\_\_\_  
*Name and position of responsible administrator*

**Level of Appeal:**      **Step I**            **Step II**            **Step III**            **Step IV**

**Disposition of  
Complaint:**


**Supporting Evidence and Reasons:**


**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Next level of appeal: \_\_\_\_\_ Deadline to file appeal: \_\_\_\_\_

501 South Santa Fe Ave., Compton, CA 90221 . (310)639-4321 Extension 55197  
**\*This form is to be used for any complaint which does not involve an Educational Program**

# **Compton USD**

## **Board Policy**

### **BP 4244**

#### **Classified Personnel**

##### Complaints

It is the policy of the Compton Unified School District, in keeping with the ultimate goal of servicing the educational welfare of students, to develop and practice reasonable and effective methods of resolving difficulties which may arise among employees. The intent is to reduce potential areas of complaints and to establish and maintain recognized channels of communication between staff and administration.

The Director of Certificated Personnel, is hereby designated as the complaint officer for the certificated staff. The Director of Classified Personnel is hereby designated as the complaint officer for classified employees. It shall be the function of these administrators to conduct appropriate in-service workshops and to establish complaint procedures and to monitor and/or facilitate the processing of these procedures within the state time lines.

Note: Should the designated complaint administrator be involved in the alleged complaint, his or her immediate supervisor or designee shall act as the complaint officer.

Formal grievances shall be processed in accordance with the procedures established in collective bargaining unit contracts when applicable.

##### Legal Reference:

###### GOVERNMENT CODE

3543 Public school employee's rights

3543.1 Rights of employee organizations

53296 Definitions

53297 Filing complaint

53298 Reprisals

53298.5 Violations; punishment

Policy COMPTON UNIFIED SCHOOL DISTRICT

Interim adopted: October 12, 1999 Compton, California

# **Compton USD**

## **Administrative Regulation**

### **AR 4244** **Classified Personnel**

#### Complaints

A complaint is an assertion by an employee that there has been a violation, misinterpretation, or inequitable application of district policies, administrative regulations and procedures, existing laws, or other actions that adversely and directly affect the employee personally and/or his/hr work.

It is the intent of this procedure that employee complaints will be identified and corrected at the earliest possible time and at the lowest level of supervision.

Complaint processing should be viewed as a positive and constructive effort which seeks to establish the facts upon which the complaint is based and come to a fair conclusion. Employees shall not be discriminated against nor shall reprisal be attempted against an employee because he/she filed a complaint.

(cf. 4031 – Complaints Concerning Discrimination in Employment)  
(cf. 4119.11 – Sexual Discrimination or Harassment)

#### Procedures

The following guidelines shall prescribe the manner in which complaints are handled:

1. All matters related to a complaint shall be kept confidential. Only those individuals directly involved in resolving the complaint shall be informed of the complaint.
2. All documents, communications, and records dealing with the complaint shall be placed in a district complaint file. No such material shall be placed in an employee's personnel file.
3. No reprisals shall be taken against any participant in a complaint procedure by reason of such participation.
4. Time limits specified in these procedures may be reduced or extended in any specific instance by written mutual agreement of the parties involved. If specified or adjusted time limits expire, the complaint may proceed to the next step.
5. Any complaint not taken to the next step within prescribed time limits shall be considered settled on the basis of the answer given at the preceding step.

Complaints shall be processed according to the step-by-step procedures outlined below:

1. Working Site Level (Step 1)

- a. A complaint shall be presented orally and informally to the immediate supervisor. If the complaint is not promptly resolved, it shall be reduced to writing, using the Employee Complaint Form (see Exhibit), and submitted to the immediate supervisor.
- b. Within five work days after receiving the complaint the immediate supervisor shall render a decision, in writing, using the Complaint Response Form (see Exhibit), to the complainant and the person or persons originally involved in the complaint.

2. Site Level (Step 2)

- a. Within five work days after receiving the decision at Step 1, the complainant may appeal the decision, in writing, to the appropriate director, principal or supervisor.
- b. The supervisor shall, within ten work days or receipts of the appeal, investigate and render a decision, in writing, to the complainant, the immediate supervisor, and to the person or persons originally involved in the complaint.

3. District Level (Step 3)

- a. Within five work days after receiving the decision at Step 2, the complainant may appeal the decision, in writing, to the Superintendent or official designee.
- b. The Superintendent or official designee shall, within ten work days of receipt of the appeal, investigate and render a decision, in writing, to the complainant, the principal or immediate supervisor, and to the person or persons originally involved in the complaint.

4. Board of Trustees Level (Step 4)

- a. Within five work days after receiving the decision at Step 3, the complainant may appeal the decision to the Board.
- b. The Board shall, within 30 work days following receipt of the appeal, investigate and render a final decision in writing to the complainant, the principal or immediate supervisor, and to the persons originally involved in the complaint.

Regulation COMPTON UNIFIED SCHOOL DISTRICT  
Interim reviewed: October 12, 1999 Compton, California

# Compton USD

## Exhibit

**E 4244**  
**Classified Personnel**

Staff Complaints

Complaint Form

Name of Complainant / Date

Assignment

Statement of Complaint

Date cause of complaint occurred: \_\_\_\_\_. State specific provision of law, district policy, or regulations alleged to have been violated by number, letter code, section, (if known), or other reason for complaint.

Level of Appeal (Step)

Complaint:

Remedies Sought:

Signature of Complainant

### COMPLAINT RESPONSE FORM

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

From:  
Name and position of responsible administrator

Level of Appeal (Step)

Disposition of Complaint:



Supporting Evidence and Reasons:

Signature

Next level of appeal:

Deadline to file appeal:

Date:

COMPTON UNIFIED SCHOOL DISTRICT

Version:      October 12, 2999      Compton, California