

M.S.D. of LAWRENCE TOWNSHIP

**HUMAN DIGNITY POLICY  
COMPLAINT FORM**

This form can be used by a school employee, student or parent, if he/she feels that his/her dignity has been violated (or in the case of a parent, his/her child's).

The form should be completed as soon as possible. Return this form to the school principal (or Assistant Superintendent, if the complaint is against the principal.)

NAME OF PERSON FILING COMPLAINT: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ DATE: \_\_\_\_\_

STATEMENT OF COMPLAINT (Please be as complete and specific as possible):