

PROHIBITION AGAINST ILLEGAL DISCRIMINATION AND HARASSMENT
(Level I Grievance Report)

CONFIDENTIAL: For Internal Use Only
To Be Completed by Compliance Officer or Designated Investigator
Attach additional sheets if necessary.

Name of Grievant: _____ / _____ / _____

Date Grievance Was Filed: _____ Investigator Assigned: _____

Other Persons Involved in the Investigation: _____

Persons Interviewed: _____

Other Information Considered: _____

After investigation, it is more likely than not that the following facts are true: _____

It is more likely than not that the district's policy prohibiting illegal discrimination and harassment

was was not violated. Reasoning: _____

FILE: AC-AF3
Critical

It is more likely than not that other district policies, regulations, procedures or expectations

were were not violated. Reasoning: _____

Corrective Action

Is corrective action needed? Yes No

If yes, state the type of corrective action recommended.

Signature of Investigator (if not compliance officer)

Date

Signature of Compliance Officer

Date

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Note: *The reader is encouraged to review policies and/or procedures for related information in this administrative area.*

Implemented: October 17, 2007

Revised:

Boonville R-I School District, Boonville, Missouri