

REQUEST FOR MODERATION OF GRIEVANCE BY AURORA ACADEMY'S GRIEVANCE COMMITTEE

Name:	Date:
Student's Name:	Contact phone #:
1. Please explain, as specifically as possible, your complar administration/staff you have spoken and the result of necessary) Attach any pertinent documentation or confidence of the confidenc	of any discussions. (Use the back, if
2. What resolution are you seeking?	
(For committee us	re)
Committee Meeting Date:	
Committee Members & Others Present (include title or po	sition):
Resolution determined by committee:	
Or Refer to full board for discussion:	

Attach any documentation and/or correspondence with person who filed the grievance.