



Bedford County Department of Education

500 Madison Street
Shelbyville, Tennessee 37160-3391
Telephone: 931-684-3284 Fax: 931-684-3289

SCHOOL PARENT COMPLAINT FORM

Date _____

Time _____ a.m./p.m.

Student _____ Grade _____ ID Number _____

Address _____

Person Filing Complaint _____

Relationship to Student _____

Phone Number: Home _____ Other: _____

Nature of Complaint _____

Action Requested _____

Has a Previous Complaint Been Filed Yes _____ No _____ Date _____

Person(s) Spoken with:

Name/Title/Department

Name/Title/Department

Resolution _____

Complaint Resolved _____

Further Action Necessary _____

Signature/Title _____

Date _____