



BURLINGTON AREA SCHOOL DISTRICT

209 WAINWRIGHT AVENUE, BURLINGTON, WI 53105

(262) 763-0210

BASD.K12.WI.US

Discrimination Complaint Form

Name _____

Address _____

City _____ State ____ Zip _____

Telephone _____ (home) _____ (work)

Status of person filing complaint

____ Student ____ Employee

____ Parent ____ Other

Filing complaint alleging discrimination on the basis of

Statement of complaint *(include type of discrimination charged and the specific incident(s) in which it occurred)*

Signature of complainant _____

Date complaint filed _____

Signature of person receiving complaint _____

Date complaint received _____

Submit all copies to:

Christopher Weins, Director of Pupil Services / Complaint Officer
Burlington Area School District
209 Wainwright Avenue
Burlington, WI 53105