Henry County Schools

Submission Form: Policies GAE; GAEB; JAA; JRA; & KN

CONTACT INFORMATION

Name (Last, First) : _____

Mailing Address: _____

Phone Number: _____	**Email Address:** _____
Does this incident/concern involve a student? **Yes ☐ No ☐** **If so, please provide the student's name.** _____	**What is your relationship to Henry County Schools (HCS)?** _____

INCIDENT/CONCERN INFORMATION

Date(s) the alleged incident(s)/concern(s) occurred:

Please list the federal or state law(s), State Board of Education rule(s), HCS Board Policy or regulation(s), and/or local school rule(s) that you allege was/were violated:

Please describe the major facts and pertinent details of the incident/concern:

Please describe the relief that you are seeking?

Please provide the names and contact information for individuals who can provide additional facts and/or details about the incident(s)/concern(s) described above. Include any employee with whom you have previously discussed the matter and the approximate date(s) and time(s) of the discussion(s).

Please attach/include copies of all applicable documentation supporting your submitted incident(s)/concern(s).

Signature:	_____	**Date:**	_____