

North Gem School District #149

COMMUNITY RELATIONS

4120F

Concern You Would Like Addressed

(Please keep your presentation to one sheet. Thank you.)

Name: _____ Date _____

Mailing Address: _____

Phone Number(s): _____

Subject: _____

Problem: _____

Examples that demonstrate the problem: _____

Results: _____

Suggested Solutions: _____

Response Date: _____ Person Responding: _____

{{Full_District_Name}}

Response to Concern

Person Responding: _____

Response Date: _____

Method used to communicate response: _____

Actions taken to investigate concern: _____

People contacted in gathering information upon which to make decision: _____

Findings of the investigation: _____

Decision: _____

Results of communicating the decision: _____

Signature