

# **Madison County School Board**

## **Complaint Procedures**

### **EQUITY STATEMENT**

#### **Non-discrimination Statement**

No person shall, on the basis of race, color, religion, age, ethnicity, national origin, marital status, disability, political or religious beliefs, national or ethnic origin be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity, or in any employment conditions or practices conducted by this School District, except as provided by law.

Procedures for Filing Complaint of Discrimination, Sexual Harassment, or Other Form of Illegal Harassment. (Refer to School Board Policy 2.70).

#### **1) Complaints: Procedures for filing.**

- a. Any person who believes that he or she has been discriminated against, or placed in a hostile environment based on gender, marital status, sexual orientation, race, national origin, religion, age or disability by an employee, volunteer, agent or student of the School District should immediately file a written complaint. The complaint should set forth a description of the alleged discriminatory actions/harassment, the time frame in which the alleged discrimination occurred, the person or persons involved in the alleged discriminatory actions, and any witnesses or other evidence relevant to the allegations in the complaint.
- b. The complaint should be filed with the School Principal or Site Administrator. Complaints filed with the Principal or Site Administrator must be forwarded to the Districts EEO Officer within five (5) days of the filing of the complaint. If the complaint is against the principal or site administrator, the complaint may be filed directly with the EEO officer.
- c. If the complaint is against the Districts EEO officer, the Superintendent, or other member of the School Board, the complaint may be filed with the School Board Attorney.

For equity issues, please contact:

Ms. Shirley Joseph, Equity Coordinator  
210 NE Duval Avenue, Madison, FL 32340  
850-973-5037  
[josephs@madison.k12.fl.us](mailto:josephs@madison.k12.fl.us)

## COMPLAINT PROCEDURE

### PURPOSE:

To secure, at the lowest administrative level, equitable solutions to claim(s) arising from a violation, misapplication, or misinterpretation of a School Board Policies, Procedures or Administrative Directives, which may include discrimination or harassment, and to establish an orderly succession of procedures wherein these solutions may be pursued.

DEFINITIONS - As used herein, the following terms have these meanings:

1. **Grievance** – A written complaint which alleges a violation, misinterpretation, or misapplication of School Board Policy or Administrative Directives, including discrimination or harassment prohibited by Policy 5.27.
2. **Employee** – includes every employee, instructional or non-instructional, of the School Board of Madison County.
3. **Student** – includes every student enrolled in the Madison County School System.
4. **Grievant or Complainant** – refers to an employee, or an applicant as defined in Section 6 below who alleges in writing that he / she has been subjected to an offense, discrimination or harassment as prohibited by local, state, Federal Laws or by the policies of the Madison County School Board.
5. **Accused Student / Employee** – refers to an employee or student who is alleged to have subjected another employee or student to an offense, discrimination or harassment as prohibited by Local, State, Federal Laws or by the policies of the Madison County School Board.
6. **Applicant** – as used herein, means any person applying for employment with the District, as well as a current District employee who applies for another instructional or non-instructional position within the District.
7. **Days** – in this procedure shall mean work days unless calendar days are specified.

### PROCEDURE:

- 1). If a person believes there was an action which occurred for which they want to file a grievance, that person will put in writing on the Madison County Complaint Form within five (5) days of the time that the action took place and provide the completed form to the Principal or Supervisor. The Principal or Supervisor will then investigate the matter and within ten (10) days make a decision regarding the merits of the grievance. Such decisions will be put in writing and supplied to all parties and appropriate action(s) taken. The EEO Officer and Superintendent of Schools will be provided a copy of the Principal's or Supervisor's findings.
- 2). In those cases where the person filing the grievance is not satisfied with the findings of the Principal or Supervisor, he / she may appeal in writing the findings to the Madison County Grievance Committee. For students, this committee is made of the District EEO Officer, a site based administrator from another school and a Student Services staff member. For member of the staff of the Madison County School System, this membership is made of the District EEO Officer, the HR Director or designee, and one additional member appointed by the Superintendent. Upon accepting the appeal, the Committee shall meet and investigate the grievance and make a recommendation to the Superintendent within ten (10) days.
- 3). Upon receiving the recommendation from the Committee, the Superintendent shall have ten (10) days to accept or reject the recommendation. Based upon this decision, the Superintendent shall take appropriate action(s).
- 4). In those cases where the person filing the grievance is not satisfied with the findings of the Superintendent, he / she may appeal the findings in writing to the Madison County School Board.

CHAPTER 6.0 PROCEDURE – PERSONNEL

PR – 6.374

MADISON COUNTY SCHOOL DISTRICT  
COMPLAINT PROCEDURE FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Status: S – Student    A – Applicant    E – Employee    P - Parent    C - Citizen

Date of alleged violation: MM/DD/YY \_\_\_\_\_

Description of alleged violation – include specific violation, date, time, place, witness(es), conditions, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Remedy sought (describe action requested to rectify the alleged violation): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Grievant

\_\_\_\_\_  
Date

**RECIPIENT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Job Title: \_\_\_\_\_

Work Location: \_\_\_\_\_

Date grievance received: \_\_\_\_\_

\_\_\_\_\_

Signature of Recipient

\_\_\_\_\_

Date

## Log of Disposition / Action

Name: _____		Date: _____	
Log of Dispositon _____			
Action Taken _____			
_____			
_____			
____ Resolved		____ Unresolved	
Principal/Supervisor Signature _____		Date _____	
Signature of Grievant _____		Date _____	

Name: _____		Date: _____	
Log of Dispositon _____			
Action Taken _____			
_____			
_____			
____ Resolved		____ Unresolved	
Principal/Supervisor Signature _____		Date _____	
Signature of Grievant _____		Date _____	

Name: _____		Date: _____	
Log of Dispositon _____			
Action Taken _____			
_____			
_____			
____ Resolved		____ Unresolved	
Principal/Supervisor Signature _____		Date _____	
Signature of Grievant _____		Date _____	