

Quarterly Report on Williams Uniform Complaints

[Education Code § 35186]

District: <u>Livermore Valley Joint V</u>	Unified School District			
Person completing this form: Melissa Theide		Title: Asst. Superintendent		
Quarterly Report Sul (check one and inclu			April July October January	(for Jan-Mar) (for Apr-June) (for July-Sept) (for Oct-Dec)
Date for information to be reported	publicly at governing b	oard meeti	ng:	
Please check the box that applies:				
No complaints were above.	re filed with any school	in the dist	rict during the o	quarter indicated
	iled with schools in the mmarizes the nature and			
General Subject Area	Total # of Complaints	#	Resolved	# Unresolved
Textbooks and Instructional Materials	-			
Teacher Vacancy or Misassignment				
Facilities Conditions (This does not apply when temporary closing of the restroom is neessary for pupil safety or to make repairs.)				
TOTALS				
	Torie F. Gibson Print Name of District		dent	
	Signature of District S	Superintende	ent ent	
	Date			
Dlagga rature comple	tod form to Alma Comina	Draigat Dira	vatar	

Please return completed form to Alma Carino, Project Director ACOE – 313 W. Winton Ave., Hayward, CA 94544-1136 FAX: (510) 670-3557 E-MAIL: acarino@acoe.org