

concern or complaint.

PO Box 360, Red Earth Creek, AB, CA TOG 1X0

Parent/ Community Member Information

E: communications@ktcea.ca P: 780.649.3103

TF: 1.855.965.8298 F: 780.649.2841

CONCERNS AND COMPLAINTS FORM

FORM 176-A

Kee Tas Kee Now Tribal Council Education Authority is committed to resolving concerns and complaints from parents or community members in a timely, and respectful manner. Under most circumstances' complaints are best resolved as close to the source of the complaint as possible. The procedure for all Parent and Community member concerns can be found under AP 176 Concerns and Complaints from Parents or Community members in the Administrative Procedures For other questions call the KTCEA office at 780-649-3103.

Requested by:		Request Date:	
		Postal Code:	
Email:	<u> </u>	Phone:	
Student Information	(If applicable)		
First and Last Name:		KTCEA ID#	
Primary Address:	City:	Postal Code:	
		Grade:	
Concern/Complaint	Information:		
	information that you wo own concern or complain	ould like to provide. This should be a description nt. Include all names, dates and places for a	
Please use the back of this do	ocument or a blank pa	ge If you need more space to explain your	

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What action would you like your : Authority to take about this matt	school or Kee Tas Kee Now Tribal Council Education er? Please state reasons.
	
lave you spoken with any KTCEA	personnel regarding your concern or complaint?
□ Yes □ No	
f so, what was the staff member(s) n	name(s)
What were the results of the disc	ussion or steps taken to resolve the matter?
	
Please be advised that your concern o Director and may be sent to the Supe	or complaint will be shared with the Principal and/or rintendent if not resolved.
Parent/Community Member PRINT NAME	Parent/Community Member SIGNATURE
Date:	

The personal information on this form is collected under the authority of the Personal Information Protection Act. The information will be disclosed only to those individuals who need the information in order to enable them to review and respond to your concerns or complaints. If you have any questions about the collection of information, please contact the KTCEA Central Office.

FOR INTERNAL USE ONLY

Receipt of Form Staff Member Name: ______Date Received: _____ Follow-up: Other Employees/Supervisors Informed: Actions taken to resolve the matter: (Describe actions taken by the staff member) What was the outcome: Other Follow-up needed: