



Beehive Science and Technology Academy Civil Rights Grievance Form

You do not have to use this form to file a complaint with Beehive Academy Science and Technology Academy. A complaint can be submitted either formal or informal in written or oral. Please include the information on this form.

1. Name of person filling out this grievance:

Last Name: _____ **First Name:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone number: _____

E-mail Address: _____

2. Name of person discriminated against (if other than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name: _____ **First Name:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone number: _____

E-mail Address: _____

Send completed forms to:

Director

Hanifi Oguz

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Title IX Compliance Coordinator

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You will receive a written response in 10 days.

If the complainant is not satisfied, you may appeal through a signed statement to the Beehive Academy's Board within 10 business days of her/his receipt of the response from Grievance Form. In an attempt to resolve the grievance, the Board will meet with the concerned parties and their representative within 40 days of such an appeal. A copy of the Board's disposition of the appeal shall be sent to each party within 10 business days of this meeting.