

## **Student and Family Grievance Policy and Procedure**

**(approved 5/27/2014; revised 8/19/2024)**

Pioneer Springs Community School recognizes the value and importance of full discussion in resolving misunderstandings and preserving good relations among all stakeholders. It is the policy of Pioneer Springs Community School that all students and parents have the right to voice their complaints or grievances about matters pertaining to our school. Accordingly, the following grievance procedure should be employed to ensure that complaints receive full consideration.

### **Formal Grievance Process**

- I. Because Pioneer Springs desires to address any concerns promptly, the grievant shall file a written notice with the Director within thirty (30) days of the initial concern or complaint. Grievants may use the following Grievance Form and shall identify:

- (1) the nature of the complaint,
- (2) the date(s) of occurrence,
- (3) the desired result, and
- (4) shall be signed and dated by the person filing the grievance.

In the event that the grievance is against the Director, the form shall be filed with the Chair of the Board of Trustees and the Board, or a committee appointed by the chair, will address the grievance in a manner consistent with the process set forth below.

- II. Upon receipt, the Director will immediately initiate an adequate, reliable and impartial investigation of the grievance, including interviewing witnesses and obtaining any other relevant evidence. All documentation and discussions related to the investigation are considered CONFIDENTIAL and will not be revealed or discussed by any participant in the process. This provision does not include discussions with governmental authorities.
- III. Within thirty (30) business days of receiving the written notice, the Director shall respond in writing to the grievant. The Director's response will summarize the course of the investigation, determine or identify the validity of the grievance, and, when necessary, suggest an appropriate resolution, including corrective and remedial action when appropriate.

### **Appeals**

If the grievant is not satisfied with the response, the grievant may appeal in writing to Pioneer Springs Community School's Board of Trustees. The appeal should summarize the outcome of the investigation and include a copy of the original grievance as well as the grievant's reasons for not accepting the Director's response. The appeal should be mailed to the attention of the Chairman of the Board at P.O. Box 480537, Charlotte, NC 28269.

Upon receipt of a request for appeal, the Board will consider the request and can require all documentation held by the school relative to the issue. The Board will review the appeal at the next scheduled Board of Trustees meeting\* and the Board's representative will respond by mail to the appellant within five (5) business days after the meeting.

\*Should an appeal be received within seven (7) days of a scheduled Board meeting then it will be tabled and reviewed at the next scheduled meeting to allow for appropriate time and consideration.

### **Prohibition against Retaliation**

Pioneer Springs Community School pledges that it will not tolerate retaliation against any person who files a complaint in accordance with this policy, makes a good faith report about perceived acts of harassment or discrimination, or who participates in proceedings related to this policy. Any student or staff member who is found to be engaging in any kind of retaliation will be subject to appropriate disciplinary action.

### **Modification**

Pioneer Springs Community School may approve modification of the foregoing procedures in a particular case if the modification (a) is for good cause, and (b) does not violate due process of Grievance Policies of Pioneer Springs Community School.

### **Contact Information:**

**Attn: Director**

**Pioneer Springs Community School**

**PO Box 480537, 9232 Bob Beatty Rd**

**Charlotte, NC 28269**

**PSCS Grievance Complaint Form**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address

\_\_\_\_\_

Telephone \_\_\_\_\_ Alternate phone \_\_\_\_\_

Best time to reach you \_\_\_\_\_

Complaint against: (Name of person, school, department, program, or activity)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Incident (s)

\_\_\_\_\_

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Specify your complaint by stating the problem. Describe the incident, participants, background, and any attempts you have made to solve the problem. List relevant dates, times, and places (attach additional pages if space needed):

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List names of others who can provide more information: (Name, address, telephone)

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The projected solution: (Indicate what you think should be done to solve the problem. Be specific.)

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I certify that this information is correct to the best of my knowledge.

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Signature of Grievant

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Date

Received by:

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Signature of Director or Chair of the Board

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Date