

Quarterly Report on Williams Uniform Complaints

[Education Code § 35186]

District: <u>Livermore Valley Jo</u>	int Unified School Distric	<u>t</u>		
Person completing this form: Melissa Theide		Title: Asst. Superintendent		
Quarterly Report (check one and in	Submission Date: clude year)		April July October January	(for Jan-Mar) (for Apr-June) (for July-Sept) (for Oct-Dec)
Date for information to be report	rted publicly at governing	board meeti	ng: <u>April 20, 2</u>	021
Please check the box that applie	es:			
above. Complaints we	were filed with any school ere filed with schools in the	e district du	ing the quarter	indicated above. The
General Subject Area	t summarizes the nature at Total # of Complaints		Resolved	# Unresolved
Textbooks and Instructional Materials				
Teacher Vacancy or Misassignment				
Facilities Conditions				
TOTALS				
Dr. Kelly Bowers Print Name of District Superintendent				
Signature of District Superintendent				
	Date)		

Please return completed form to Sierra Falcon, Program Specialist ACOE – 313 W. Winton Ave., Hayward, CA 94544-1136 FAX: (510) 670-3557 E-MAIL: sfalcon@acoe.org