

NORTH HARDIN CHRISTIAN SCHOOL CONFLICT RESOLUTION FORM (Email office@nhcky.org / Fax 270.351.7757)

Name of Person Filing Report		Date:			
Contact Information	Phone Number:	Email:			
Filed on behalf of: (Student's Name)		'			
COMPLAINT					
Person(s) Involved					
Location					
Date of the Incident					
Witnesses					
Please state your conflict in the space below. Feel free to use the back side of this form or attach a separate sheet if necessary, but please provide as much detail as possible.					
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Once the conflict resolution form is filed with the school office, you will contacted within 24 hours.

RESOLUTION PAGE

Received by:		Date:	
Investigation Procedure:			
Results:			
·			
Notification given to complainant via:			Date:
School Board Member's Signature			

Final decision for each conflict rests with the decision of the NHCS School Board.