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**Jill Larson**  
 Superintendent  
 Phone: (217) 364-4811  
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 Elementary Principal  
 Phone: (217) 364-4035  
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**Tri-City Board of Education  
 Communication Form**

*Any parent who wishes to file a concern must fill out this form completely and turn it in to the Superintendent. All communications/concerns will be processed in accordance with Board Policy. If it involves personnel or a student, the parent will need to address the board in closed session.*

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

2. Please state date of the event or series of events causing the communication/concern:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Please state specific facts of which you are aware to support your communication/concern (list in detail- witness names and all other relevant facts). Use the back of attach additional paper as needed.

\_\_\_\_\_

\_\_\_\_\_

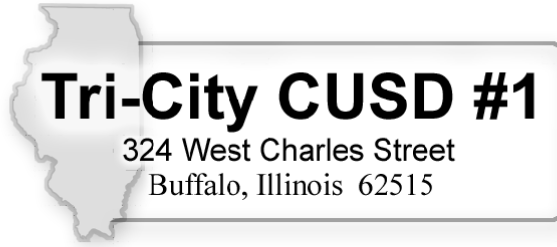
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4. Describe any earlier efforts to resolve this matter or the reasons no such efforts were pursued.

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5. What specific remedy or corrective action are you seeking?

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\_\_\_\_\_  
 Parent Signature

\_\_\_\_\_  
 Date