

Request for Access to the Student Ombudsman of the Sir Wilfrid Laurier School Board

COORDINATES OF PERSON REQUESTING ACCESS TO THE STUDENT OMBUDSMAN

Student Information: (Please print)

Family Name: First Name:

Name of School:

Permanent Code: Level:



Family Name: First Name:

Relationship to Student: FATHER MOTHER LEGAL GUARDIAN

Address:

City: Postal Code:

Telephone: Home: Work:

Fax: Cell:

E-Mail:

PRELIMINARY QUESTIONS

<p>1. Have you registered your complaint with the school board?</p> <p align="center"><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Note: If the answer was no, explain the process for the registration of a complaint as the Student Ombudsman will not entertain a case that has not already go through the normal complaint process. Proceed to register the complaint</p>	<p align="center">Office Use Only</p> <p>Note: If the response was yes, please complete the following:</p> <p>Complaint Management System Verified <input type="checkbox"/></p> <p>Complaint Registered <input type="checkbox"/> Date: _____</p>
<p>2. If the answer to the above was yes, inquire about the following, to ensure all steps of complaint process were followed:</p>	<p>Have you spoken with any of the following:</p> <p><input type="checkbox"/> Teacher <input type="checkbox"/> Vice-Principal</p> <p><input type="checkbox"/> Principal <input type="checkbox"/> Secretary General</p> <p><input type="checkbox"/> Assistant Director General</p> <p><input type="checkbox"/> Director General</p>
<p>3. Are you in agreement with the decision/recommendation taken?</p> <p align="center"><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>If the response is yes, find out why they are calling:</p> <p> </p> <p>If no, proceed to the next step (#4)</p>
<p>4. As you do not feel that your complaint was resolved we ask that you contact the Student Ombudsman, Vincenzo Guida (Interim) at 450-621-5600, extension 1440 or studentombudsman@swlauriersb.qc.ca.</p>	
<p>DATE: _____ TIME: _____</p>	

**Request for Intervention by the Student Ombudsman
for the Sir Wilfrid Laurier School Board**

NOTE: The masculine gender, when used in this document, refers to both women and men. No discrimination is intended.

Notwithstanding the duty to respect the confidential nature of your personal information, you hereby authorize the Sir Wilfrid Laurier School Board Student Ombudsman, its employees and representatives to obtain and use personal information pertaining to you and communicate such information to persons to whom it deems necessary to do so, in order to investigate and/or process your request.

If, at the end of this process a recommendation is issued, it will be forwarded to you in writing and copies will also be forwarded to the Secretary General and the Council of Commissioners, the responsible body entrusted by law to follow-up on any opinion given on the merits of the complaint and, if any, the corrective measures recommended by the Student Ombudsman.

1. PETITIONER'S ADDRESS & OTHER INFORMATION (MANDATORY)

Student Information: (Please print)

Family Name: First Name:
Name of School:
Permanent Code: Level:



Family Name: First Name:
Relationship to Student: FATHER MOTHER LEGAL GUARDIAN
Address:
City: Postal Code:
Telephone: Home: Work:
Fax: Cell:
E-Mail:

N.B.: If your request concerns other persons, it is important that you also submit these persons names, phone numbers, and addresses. If more space is required, please attach a separate sheet.

2. PRELIMINARY QUESTIONS

2.1 Have you registered your complaint with the school board?

YES NO

2.2 Have you spoken with any of the following:

Teacher Principal Vice-Principal
 Secretary General
 Assistant Director General
 Director General

2.3 Have you lodged a written complaint to the Secretary General?

YES NO

2.4 Was your case reviewed and a decision rendered by the Council of Commissioners?

YES (PLEASE PROVIDE A COPY OF THE RESOLUTION) NO

3. PLEASE DESCRIBE YOUR COMPLAINT

4. FOR WHAT REASONS ARE YOU DISSATISFIED WITH THE HANDLING OR THE OUTCOME OF YOUR COMPLAINT?

5. PLEASE DETAIL ALL STEPS TAKEN TO DATE IN ORDER TO TRY TO RESOLVE THIS PROBLEM

6. LIST THE NAMES OF ALL REPRESENTATIVES WITH WHOM YOU HAVE DEALT WITH TO DATE WITH REGARD TO THIS SITUATION. PROVIDE TITLES, PHONE NUMBER AND WORK ADDRESS (IF YOU KNOW THEM). ALSO CONFIRM IF YOU CONTACTED THE COMMISSIONER IN YOUR ELECTORAL DIVISION OR THE CHAIR OF THE COUNCIL OF COMMISSIONERS

7. PROVIDE A COPY AND LIST BELOW ALL RELEVANT CORRESPONDENCE AND DOCUMENTS

8. WHAT REMEDY ARE YOU SEEKING WITH YOUR PRESENT PETITION TO THE STUDENT OMBUDSMAN OF THE SIR WILFRID LAURIER SCHOOL BOARD?

SIGNATURE

DATE

YOU MAY SUBMIT YOUR REQUEST TO: Vincenzo Guida, Student Ombudsman (Interim)

By Mail	Fax	E-Mail
Sir Wilfrid Laurier School Board 235, montée Lesage Rosemère (Québec) J7A 4Y6	450-621-7929	studentombudsman@swlauriersb.qc.ca