WDEA Member Name: _____

School Site: _____ **Date**: _____

Site Representative: _____

Administrator contacted: **yes** **no** (circle one)

Individuals Involved:

_____

_____

Please give the section & page number of the WDEA contract that you believe has been violated:

_____

_____

_____

_____

_____

Details and/or History of the issue:

_____

_____

_____

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Member Signature: _____ Date: _____