



# GREATER Johnstown SCHOOL DISTRICT

## Bus Complaint Form

### Contact Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone Numbers: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### Vehicle/Driver/Monitor Information

Bus Number: \_\_\_\_\_ Driver Name: \_\_\_\_\_  
 Monitor Name: \_\_\_\_\_ Type of Transportation: \_\_\_\_\_  
 (Regular Education, Special Education, Non Public, Other)

### Complaint

Date of Complaint/Incident: \_\_\_\_\_ Approximate Time: \_\_\_\_\_

**Complaint/Incident Details** *(Use back of page if additional space necessary)*

Were there any witnesses (yes or no)? \_\_\_\_\_  
 If yes, please provide names and contact information below. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Did you report your concerns to any other school or bus staff (yes or no)? \_\_\_\_\_  
 If yes, please provide the names below. \_\_\_\_\_  
 \_\_\_\_\_

What actions do you believe should be taken to resolve the complaint/incident?

My signature below attests that the information provided in this complaint is true and correct to the best of my knowledge:

\_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Date**

**Submit the completed form to:**

Greater Johnstown School District - Mr. Richard Price  
 222 Central Avenue  
 Johnstown, PA 15902  
 (814) 533-5601, ext. 5922; rprice@gjsd.net