



Ethics Commission of
Waukegan Public School
District

Ethics Complaint Form

Name _____

Address _____

Telephone: Home _____; Other _____

Date of alleged ethics violation: _____ [Ref. Board Resolution, Sect. 5-5(g)]

Officer or Employee which is the subject of your complaint: Please provide the name, title, department and address (if known) of the person you allege committed a violation of the Ethical Conduct Resolution.

Type of Allegation(s): Please check any box below which is the misconduct you allege:

Prohibited political activity [Ref. Board Resolution, Section 2]

Gift ban [Ref. Board Resolution, Section 3]

Note: Before completing this form, please refer to the Board Resolution and Commission rules for additional information concerning these topics.

Other Information or Related Complaints:

Please state any additional information which supports your complaint. If you have made other related complaints, please attach a copy or identify the official, agency or judicial entity with which the complaint was filed.

Date: _____

Signature: _____

DRAFT

SUBSCRIBED and **SWORN** to before

me this _____ day of _____, 201_____

Notary Public