

## FLN Grievance and Complaints Form

This form is to detail grievances for FLN team members, volunteers, students. (For serious grievances and complaints received from other parties. Refer to FLN's Grievance and Complaints Policy).

Date: \_\_/\_\_/\_\_

Your Name: \_\_\_\_\_

Relationship to FLN: \_\_\_\_\_

Address:

\_\_\_\_\_

Date, time and place of event leading to grievance or complaint:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Detailed account of occurrence (include names of persons involved, if any):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please state policies, procedures, or guidelines that you feel have been violated:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your proposed solution to grievance or complaint:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The signature below indicates that you are filing a grievance or complaint, and any information on this form is truthful.

\_\_\_\_\_

Signature Date \_\_/\_\_/\_\_

*You should retain a copy of this form for their personal record.*