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|  | **GRIEVANT INFORMATION** |
| **GRIEVANT NAME** |   |
| **MAILING ADDRESS** |   |
| **TELEPHONE NUMBER** |   |
| **EMAIL ADDRESS** |   |
| **POSITION** |   |
| **DATE OF OCCURENCE** |   |
| **WORK LOCATION** |   |
|  |  |
|  | **DETAILS OF EVENT LEADING TO GRIEVANCE** |
| **WHO WAS INVOLVED?** Provide names and titles. Include witnesses. |   |
| **WHEN DID IT OCCUR?** Date and time |   |
| **WHERE DID IT OCCUR?** Specific locations |   |
| **WHAT HAPPENED?** Describe the event in detail. Also, describe any incidents giving rise to the grievance.  |   |
| **ADDITIONAL COMMENTS** Attach sheets, if needed. |   |

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|  | **PROVIDER COMMENT/CONCLUSION** |
| **DATE AND TIME COMPLAINT WAS RECEIVED?** |   |
| **NATURE OF THE COMPALAINT?****DATE COMAPLAINT WAS RESOLVED?** |   |
| **PROVIDER INVESTIGATION PROCESS** |   |
| **PROVIDER INVESTIGATION FINDINGS**   |   |
| **ACTION TAKEN TO RESOLVE THE COMPLAINT** |   |
|  |  |