Grievance Complaint Form

Please type or print in ink.			
Have you verified that the person y Constructed Awareness (must be c _YesNo			
If not, please contact info@tylerorr. with Constructed Awareness. Consagainst those that are not associate	tructed Awareness	cannot process complain	
Full Name of person making compl	laint:		
Address:			
Phone:			
Email (If you attended a Constructeregistered with):	ed Awareness trair	ing, please use the email y	/OU
Did you attend Constructed Aware	eness training?	YesNo	
If yes, which training(s) or workshop	o(s) did you attend	?	
If no, please explain your association	on with Constructe	d Awareness:	
Full name of the Trainer/Facilitator	this complaint or g	ievance is in regards to:	
When did the alleged misconduct	occur for which yo	u are filing this form?	
What is the most recent date of the	e alleged miscond	uct?	
Have you discussed this situation w YesNo	ith the trainer/facil	tator you are complaining	about?
Have you filed a complaint with ar YesNo	ny other organizatio	on(s) related to this miscond	duct?
If yes, please indicate below: Yes, State Licensing Board Yes, NBCC Yes, APA	Date: Date: Date:	Status: Status: Status:	

Yes, civil suit (e.g., malpractice suit)	Date:	Status:
Please answer the following questions t	o help us to understo	and your complaint:
Summarize for us in 2-3 sentences the n	ature of the alleged	misconduct:
Summarize for us in 2-3 sentences the "oviolated:	Code of Conduct" yo	ou believe has been
On separate paper, please type (or pri while being as concise as possible: 1. A summary of the events in chro including the most important do trainer/facilitator. 2. A complete account of the miss	nological order lead tes related to the be	ing up to the misconduct,
3. Any relevant information about4. Any steps you have taken to ad	what happened afte	er the misconduct occurred.
Please send us photocopies (not originallegations.	als) of any evidence	you have related to your
Note: Please only send documents dire of unnecessary documentation may de	•	, -
If this is a billing matter, have you includ _YesNoNA	ded all the relevant d	locuments?
Please sign each of the releases below complaint form if these releases are co your complaint will be delayed while w	mplete. If they are in	complete, processing of
Releases		
I hereby grant the trainer/facilitator(s) of permission to give Constructed Awarer myself—including but not limited to: an answer all questions Constructed Awar grievance, and therein release the train disclosure of my confidential information of resolving my complaint.	ness any confidential ly records of our inter eness may have in o ner/facilitator from lic	information regarding actions, clearance to rder to address my ability related to the
Signature:	Date:	_

Signature: ,	Date:

Return the completed form and documentation to: Constructed Awareness 6801 Sam Smith Rd Birchwood, TN 37308