

## **Grievance Form**

Please fill out the information below and the issue and return to the JFS Director. You may also call, write, or e-mail any concerns. You can expect a response within 24 hours from the Director.

| Client Name:              |         | Date: |  |
|---------------------------|---------|-------|--|
| Address:                  |         |       |  |
|                           | E-mail: |       |  |
| Who is Filing the Grievan | ce:     |       |  |
|                           |         |       |  |
|                           | ***     |       |  |
| Issue:                    |         |       |  |
|                           |         |       |  |
|                           |         |       |  |
|                           |         |       |  |
|                           |         |       |  |
|                           |         |       |  |
|                           |         |       |  |
|                           |         |       |  |
|                           |         |       |  |
| Steps Taken & Disposition | 1:      |       |  |