

Attain, Inc.

Community Complaint/Concern

Complaint issued by:

(Last Name)

(First)

(Middle)

(Address)

(Evening Phone)

(Daytime Phone)

(e-mail)

Statement of complaint/grievance:

Provide name(s) of person(s) involved, time, date and location of the incident and detailed, factual description. Names of witnesses must be included. Please attach additional sheets if necessary.

(Complainant signature)

(Date)

Fax form to: 321-248-0109

Email form to: ccook@myattain.org

Call: 407-965-3055

Complaint received by:

(Staff signature)

(Date)

Date Approved: 12/12/2007

Approver(s): Craig Cook (Executive Director)