**Formal Grievance and Complaint**

This form is for individuals served and/or legal representatives to file a formal grievance or complaint as described in Lifeworks Grievance Policy and Procedure. You may ask a Lifeworks staff or the human resources for assistance in completing this form.

Date:

Name of person making the formal grievance/compliant:

Contact Information (phone number, etc.):

Name and relationship of the person served:

Name of the person completing this form:

Nature of formal grievance/complaint:

**SEND CONFIDENTIALLY to:**

Lifeworks Services, Attention: Andrea Lang

6636 Cedar Ave, Suite 250 Richfield, MN 55423 or alang@Lifeworks.org

**OFFICIAL USE ONLY:**

Received by:

Date formal grievance/compliant received:

Date VP or Director of Services Received grievance/complaint: