



The Office of  
Human Resources

**Complaint Form**  
(Print or Type)

**Complaint** – A complaint is a concern which an employee wants to discuss with supervisory personnel in an effort to resolve the matter. Personnel actions such as performance evaluations, rates of pay, position re-classifications, or position terminations due to reduction in force do not fall under the definition of complaint.

**Name** \_\_\_\_\_  
**Position** \_\_\_\_\_ **Department** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Step 1**

Has this matter been discussed with your immediate supervisor?      Yes      No

Name of immediate supervisor \_\_\_\_\_

Date complaint initially discussed with immediate supervisor \_\_\_\_\_

*If answered "No", you must seek resolution with your immediate supervisor before proceeding.*

**Step 2 (if necessary)**

Has this matter been discussed with your next higher level supervisor?      Yes      No

Name of next higher level supervisor \_\_\_\_\_

Date complaint initially discussed with next higher level supervisor \_\_\_\_\_

*If not satisfied with the result of Step 1, you must notify your next higher level supervisor for further review.*

Please explain the nature of your complaint (a separate sheet may be attached if necessary):

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How would you like for this matter to be resolved?

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\_\_\_\_\_  
**Employee's Signature**

\_\_\_\_\_  
**Date**