



Training Program Grievance Form

This form should be used by participants who wish to appeal a decision of or report an incident involving Chicago Women in Trades (CWIT) staff. Before filing a formal grievance, expectation is that the participant has made a sincere attempt to resolve their complaint with the Respondent, except for complaints that include allegations of unlawful discrimination or sexual misconduct, where an attempt at informal resolution is not required.

Please type your responses in the boxes below. If you need additional space, attach extra paper and related documentation if it is appropriate.

Grievant (person filing grievance)
Name:
Program:
Phone number (with area code):
Email address:
Mailing address (with zip code):
Respondent
Name:
Phone number (with area code):
Email address:
Grievance
Describe the nature of the complaint:
What was the date of occurrence?
What remedy, or solution, are you seeking? (You may provide several options.)

What steps have been taken to resolve the complaint? (e.g., emailed or met with respondent). Fill in the action taken, the date of the action, and the outcome below. (Please note that an outcome could include a lack of a response.)

Chicago Women in Trades Staff Section

Action taken:

Date:

Outcome:

Action taken:

Date:

Outcome: