



Missoula Coordinated Entry System Grievance Form

INSTRUCTIONS: This form is to be filled out in its entirety if you have a grievance with the Coordinated Entry System (CES) process. Those with grievances have fifteen (15) days from the date of notice to make such a request and it must be received by MCES on or before the date that this time period ends. A grievance may include any complaint against the Coordinated Entry System policies and/or procedures. Grievances against specific agencies within the CES should be filed specifically with that agency first. By completing this Grievance Form, you are consenting that your information be shared by and with any and all of Missoula's Coordinated Entry System members involved in the grievance process.

_____/_____/_____
Participant Print Name Signature Date

Phone Number Address E-mail

EXPLANATION OF YOUR CONCERN/GRIEVANCE

WHAT ACTION YOU BELIEVE WOULD SOLVE THE PROBLEM:

MCES will respond to your grievance in writing within 15 days. If you are not satisfied with MCES's response to your grievance, you can request an investigation with the Montana Continuum of Care Coalition: admin@montanacoc.org

FOR OFFICE USE ONLY		
_____	_____	____/____/____
<i>Reviewed By</i>	<i>Signature</i>	<i>Date</i>
Outcome:		

Questions? Contact Sam Hilliard at 406-552-6392,
or e-mail Sam Hilliard at hilliards@ci.missoula.mt.us