

## Member Grievance Record

Part A: Please complete all of part A for all grievances, complaints or comments to be addressed.

Part B: The committee is to complete Part B. This part records the actions

Part C: In event that the grievance is to reported to AOCRA – TCO Committee actions and documentation to support.

Part D: Follow up and resolution

Please attach additional sheets if required.

### Part A:

Name of person with the Grievance: _____				
Date: _____		Time: _____ am/pm		
Name of the person completing the record: _____				
Type of communication (Please circle)	Phone	Face to face	Letter	Note
Clearly state the Grievance:				
Identify Action for Resolution:				
Mutual solution reached? Yes/No (If no, complete Part B)				
Name: _____				
Signed: _____				
Date: _____				
Record presented to Club official – Name:			Date	

**Part B:**

Name of receiving committee official: \_\_\_\_\_

Date of Committee Meeting: \_\_\_\_\_

Supporting documentation YES NO ( If yes please attach)

Plan Of  
Action: \_\_\_\_\_ - \_\_\_\_\_

Outcome reached: Yes - Complete and file  
Outcome:

No – Referring onto AOCRA

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed by President:  
\_\_\_\_\_

**Part C:**

Date of notification to AOCRA: \_\_\_\_\_

Attach any further correspondence.

**Part D:**

Follow up & final resolution:

Date \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Filed and attached to minutes dated: \_\_\_\_\_