  
**Community Compliant Form**

Instructions: Please complete this form with as much detail as possible to allow for a thorough review and resolution of your complaint. You may submit this form to the appropriate Program Director/Manager or the Chief Operating Officer (COO) if the complaint concerns the agency at-large. Their contact information is listed on our website. Anonymous complaints will be addressed but may not be formally investigated without documentation and witnesses. See the agency’s Community Complaint Policy (4.22) on the website or contact the Human Resource Department for more information.

**Complainant Information:**

|  |  |
| --- | --- |
| Name: |  |
| Phone Number: |  |
| Email Address: |  |
| Mailing Address: |  |

**Complaint Details:**

|  |  |
| --- | --- |
| Date of Incident: |  |
| Location of Incident: |  |
| Department/Program Involved: |  |
| Individual(s) involved: |  |

**Description of Complaint:**  
(Provide a detailed description of the issue, including specific incidents, dates, and any relevant information. Any physical evidence may be attached or provided. Attach additional pages if applicable.)

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**Resolution Sought**

What outcome would you like to see taken?

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**Submission & Review Process**

-Submit To: Program Director/Manager or COO (if agency-wide issue)

-Review Timeline: A resolution will be provided within five (5) business days. If necessary, the complainant will be contacted for further clarification.

-Final Review: If unresolved, the complaint will be escalated to the CEO for further investigation, which may take up to ten (10) business days.

-Final Decision: If applicable, a written resolution will be provided to the complainant and relevant entities.

**Acknowledgment and Signature:**  
I affirm that the information provided is accurate and truthful to the best of my knowledge. I understand that my complaint will be reviewed following Rooftop of Virginia CAP’s Community Complaint Policy.

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

Complainant Signature Date

*Thank you for bringing this matter to our attention. Rooftop of Virginia CAP is committed to addressing community concerns promptly and fairly.*

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**For RTOV Use Only:**

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| --- | --- |
| Date Received: |  |
| Received By: |  |

Action Taken:

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

Signature, Title, Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Final Resolution (if applicable):

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Signature, Title, Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***DECISION IS FINAL; MATTER IS CONCLUDED.***

For complaints involving the CEO, the Human Resource Manager will submit the completed form to the Personnel Committee. Documentation of their findings/resolution will be attached and kept on file. Copies will be kept in the Human Resource Department in a secure, confidential file labeled “Community Complaints.” Additional documentation may be attached.