



Tulalip TERO
COMPLAINT FORM

Date: _____

* Name of Complainant: _____

* Mailing Address: _____

* Contact Number: _____ Message Number: _____

* Email Address: _____

COMPLAINT DETAILS

* Date the incident occurred: _____

* Incident Location: _____

* Person, Agency or Employer the Complaint is against: *(attach on separate paper if more room is needed)*

Name: _____ Title: _____

Contact Number: _____ Email: _____

Name: _____ Title: _____

Contact Number: _____ Email: _____

Witness or Possible Witness's contact information: *(attach on separate paper if more room is needed)*

Name: _____ Title: _____ Phone: _____

Name: _____ Title: _____ Phone: _____

Please give a summary of your
complaint: _____

Please state what remedy or result you would like to see occur:

All information shall be kept confidential to the fullest extent possible, unless disclosure is required for further investigation, or during a hearing or appeal. However, TERO shall not allow the goal of confidentiality to be a deterrent to an effective investigation.

TERO Complaint. An aggrieved party (“complainant”) may file a written signed complaint stating the basis for an alleged violation of this code. The complaint must include a detailed account of the facts with supporting documentation and the remedy that they are seeking. The complaint must be filed at the TERO office within 14 days from the date of the last action or omission upon which the complaint is based. The TERO office shall serve the complaint on the respondent.

(2) Contracting Complaint. A contractor aggrieved by a decision of a contracting agency (“complainant”) must first file a written signed complaint with the contracting agency stating the basis of the alleged violation of this code. The complaint must include a detailed account of the facts with supporting documentation and the remedy that they are seeking. The complaint must be filed with the contracting Agency no later than 14 days from the date of the action or omission upon which the complaint is based.

I believe this statement to be true and correct to the best of my knowledge. I also understand that by signing this form, I give the Tulalip TERO representative authorization to gather all information related to this complaint and if needed, to further investigate this complaint.

SIGNATURE

DATE

FOR TERO INTERNAL USE ONLY

Date Received: ___/___/___

Assigned Compliance Officer: _____

TERO CODE VIOLATION: EMPLOYER CONTRACTOR

EEOC VIOLATION: RACE AGE RELIGION NATIONAL ORIGIN SEX RETALIATION

NO JURISDICTION:

TERO FINDINGS:

APPEAL TO TERO COMMISSION: YES NO HEARING DATE: ___/___/___

TERO COMMISSION FINDINGS:

INVESTIGATION COMPLETION DATE: ___/___/___

COMPLIANCE OFFICER SIGNATURE: _____

TERO MANAGER SIGNATURE: _____