Insert organisation name/logo]

grievance management form

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| **Name of person reporting grievance (complainant)** |  |
| **Name of respondent** |  |
| **Name of staff member handling the grievance** |  |
| **Date of receiving the grievance** |  |
| **Grievance form attached?** | **□ Yes □ No** |
| **Describe the grievance**  |
|  |
| **Respond to complainant within 5 working days?** | **□ Yes □ No** |
| **Inform respondent within 10 working days?**  | **□ Yes □ No** |
| **Is respondent’s response attached?** | **□ Yes □ No** |
| **What resolution actions have been undertaken?** |
|  |

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| **Proposed and actual resolution** |
|  |
| **Outcomes of this resolution, any further actions** |
|  |
| **Name of complainant** |  |
| **Complainant signature** |  | **Date** |  |
| **Name of respondent** |  |
| **Respondent signature** |  | **Date** |  |

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| **Staff member managing the grievance**  |  |
| **Position** |  |
| **Signature**  |  | **Date** |  |

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| **Follow up** |
| **One month follow up date** |  |
| **Grievance reopened date** |  |
| **Follow up closure date** |  |

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| **Any further actions required?** |  |
| **Staff member managing the grievance**  |  |
| **Position** |  |
| **Signature**  |  | **Date** |  |

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| **Closure** |
| **Grievance closure date**  |  |
| **Name of complainant** |  |
| **Complainant signature** |  | **Date** |  |
| **Name of respondent** |  |
| **Respondent signature** |  | **Date** |  |