

CITY OF EVERETT PARKS AND RECREATION NON-DISCRIMINATION GRIEVANCE FORM

Please submit this form if you believe that the City, in implementing their non-discrimination policy, has not demonstrated, over time, a good faith effort to achieve the goals articulated in the Policy. Copies of the City's Policy on non-discrimination are available at www.everettwa.org/parks

1. Name of person submitting grievance: _____

2. Name of person on whose behalf the grievance is submitted: _____

3. Grievant Mailing Address: _____

4. Grievant best contact phone number: _____ Best time of day for calls: _____

5. Date(s) and Location(s) associated with the grievance: _____

6. Grievant description of policy violation including the name of the person and/or organization related to this grievance: (may attach additional pages to this grievance form)

7. Actions taken to date, if any, including contact names and phone numbers, by the grievant to resolve this grievance.
