



## CLIENT GRIEVANCE

It is the policy of the Arizona Coalition to End Sexual and Domestic Violence to provide its programs and services to each client fairly and without discrimination because of race, religion, national origin, color, gender, sexual orientation, age, citizenship, political affiliation, language, marital status, or disability. If you believe you have been treated unfairly by a staff member, agency management is interested in hearing your concerns. After your grievance has been investigated by the Chief Executive Officer or her designee, you will be contacted in writing of an appropriate resolution to your dispute within 14 business days. Thank you for your cooperation.

Please fill in the requested information below and mail or email to:

**The Arizona Coalition to End Sexual and Domestic Violence**  
**ATTN: Finance and Administration Manager**  
**2800 N. Central Ave, Ste. 1570, Phoenix, AZ 85004**  
**Email: [da@acesdv.org](mailto:da@acesdv.org)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Evening Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Describe the Event (attach additional paper as necessary):

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

Date of the Event: \_\_\_\_\_

Name(s) of Staff Member(s) or Other Individuals Involved:

\_\_\_\_\_

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date