Coordinated Entry System Grievance Form

You have the right to file a grievance about the Coordinated Entry (CE) System The information on this form will be used to address your concerns and will be kept confidential. If you need assistance completing this form, please contact a case manager. Completing this form will not negatively affect your status within the Coordinated Entry System. Please bear in mind that the Coordinated Entry Process cannot guarantee placement into permanent housing, as demand for housing is far greater than the current supply in our community.

Name of person completing this form (grievant):		
Cell #:		
HMIS ID (if applicable):		
e 🗆 Email		
mation:		
with the alternate contact?	□ Yes	□ No
e. no assessment provided) ousing designation) ough from housing provider)		
	HMIS ID (if applica HMIS ID (if applica Email mation: with the alternate contact? e. no assessment provided) busing designation)	HMIS ID (if applicable): E

Note: if you have a grievance about a particular agency or shelter, please go through their grievance process.



1

Explain the grievance, including the names specific as possible.	of those involved and dates. Please be as
What has been done to fix this (by yourself	or others)?
Signature:	Date:

Please email this completed form to <u>coordinatedentry@cafth.org</u> with the subject line "CES Grievance" You can expect a response that the form was received within 5 business days. You should receive a response to the complaint within 10 days of verification we received the complaint.



2