



Anonymous Reporting Form

Please use this form to file a complaint with FamilyWise's Executive Director. You have the right to submit this form with your contact information or anonymously.

Return form, typed or printed, to:

"Ann Gaasch (CONFIDENTIAL)" via

Mail
FamilyWise
3036 University Ave SE
Minneapolis, MN 55414-3316

Fax
612.617.0193

Email
AGaasch@FamilyWiseServices.org

Federal Law provides various protections and remedies for individuals so they may make good faith complaints and participate in an investigation without fear of retaliation.

Please identify the nature of your complaint:

Complaint Type	Mark with an "X":
Fraud	
Theft	
Financial misconduct	
Sexual harassment	
OEEOC/MN Dept. of Human Rights (discrimination on basis of race, color, creed, religion, national origin, sex, sexual orientation, marital status, physical or mental disability, receipt of public assistance and age)	
Other	

Provide a detailed description of your complaint.



When did the incident occur, is it ongoing?

(Exact dates and times are better than a broad range like "last year".)

Please provide names or detailed descriptions of those involved.

(If unknown, give title or anything else that can be used to identify.)

Where did the incident(s) occur?

(Example: 3036 University Ave SE, Second Floor, Group Room 4)

How did you become aware of this activity?

(Did you witness the incident(s) or hear about it afterwards?)

Are there any other witnesses and how can they be contacted?



Please list (and attach, if available) any documentation or other evidence that will assist in the resolution of this complaint.

Is/are the subject(s) of this complaint aware of these allegations?

Please provide any additional information that may assist in the resolution of this complaint.

NOT REQUIRED: Please provide your contact information so we can inform you of the status of the complaint.

Please return this form, and any additional documentation, using the instructions at the top of the first page.

