

**TCEA OFFICIAL COMPLAINT FORM**

Date: \_\_\_\_\_

Person filing complaint: \_\_\_\_\_

Phone: \_\_\_\_\_

Where may you be reached (Address)?  
\_\_\_\_\_  
\_\_\_\_\_

Explain nature of complaint:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested remedy:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Response #1: (Level--Line staff)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Response #2: (Level--Executive Director)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Response #3: (Level--Board of Directors)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Complainant Signature : \_\_\_\_\_