US SAILING GRIEVANCE AND ADMINISTRATIVE PROCEEDINGS REPORT FORM

Date Submitted:
Complainant’s Name and Title/Member ID:

Complainant Filing Grievance Against:

GRIEVANCE TYPE:
___ Denial of Rights (equal access/handicap access)
___ Sexual/Physical Misconduct or Harassment
___ Disciplinary Action (reprimands/suspensions/restrictions/terminations/dismissals/demotions)
___ Other __________________

Date of Incident: ________________

Statement of Allegations: (5000 word limit complaint must describe the nature and facts of the event that has led to complaint, including but not limited to: names all individuals who are allegedly responsible for the acts or omissions that are the subject of the complaint, a statement describing the incident that occurred, including where, when, why it occurred and the individual and/or organization believed to be responsible for the acts or omissions described in the complaint).

Please attach copies of any supporting documentation to this form.

Violations of USS Policies: (provide a list of policies, procedures, and rules complainant believes has been violated)

Remedy/Relief Requested:

I have exhausted any other available administrative remedies under USSA’s policies and procedures by:

Complainant Attestation
I, ____________, state that the above information is accurate, true, and complete to the best of my knowledge.

Complainant’s Signature:
Date:

US SAILING USE ONLY

Date of complainant’s initial grievance: ______________

DECISION OF THE PANEL: ________________________________________________________________

Date decided: ________________