



**TANGRAM, INC.  
COMPLAINT FORM**

**Date completed:** \_\_\_\_\_

**Name of person filing complaint (please include relationship if not the individual involved in the complaint):**

\_\_\_\_\_

**Relationship to individual, if applicable:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Daytime phone:** \_\_\_\_\_ **Evening phone:** \_\_\_\_\_

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

**Location of occurrence:** \_\_\_\_\_

**Name of individual on whose behalf the complaint is made:**

\_\_\_\_\_

**Does your complaint involve any alleged or suspected discrimination?**

Yes       No

**If so, based on what characteristic?**     Race       Color       National Origin

**Does your complaint any alleged or suspected abuse, neglect or exploitation?**

Yes       No

**Date(s) of incident:**

\_\_\_\_\_

**Shift(s) when incident(s) occurred, if known:**

Day       Afternoon       Night       Overnight

**Time(s):** \_\_\_\_\_

**Please describe the nature of your complaint (including all contributing factors that are causing the concern or issue):**

**Please list any other persons having information about the issue/concern identified in the complaint:** \_\_\_\_\_

\_\_\_\_\_

**Please list any records that have been or should be examined:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please list the name(s) of staff person(s) if violation involves action or lack of action by staff:** \_\_\_\_\_

\_\_\_\_\_

**Please list any external parties to whom your complaint has also been sent (e.g., case manager, BQIS, BDDS Representative, other federal, state or local agency, federal, state or local court, APS/CPS, etc.):** \_\_\_\_\_

\_\_\_\_\_

**Please verify the best contact method for you so that the investigator may get in touch with you regarding your complaint:** \_\_\_\_\_

\_\_\_\_\_

**Please note that you will be contacted directly by the Director of Operations and/or the Director of Compliance and Risk Management at the onset of the investigation, as well as at its conclusion, to inform you of the efforts involved to resolve your situation. If applicable, the Director of Compliance and Risk Management will provide written notification regarding the actions to be taken to address the complaint. This written notification may be made via postmarked letter or email, depending on the preferences of the person making the complaint. For additional information about your rights and responsibilities when filing a complaint, or for additional information about Tangram’s Complaint and Problem Resolution procedures, please refer to Tangram’s Complaint and Problem Resolution policy.**

\_\_\_\_\_  
**Signature of Client or Client’s Legal Guardian**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Tangram’s Director of Compliance and Risk Management**

\_\_\_\_\_  
**Date**