



CAMBRIDGE-ISANTI

YOUTH FOOTBALL



GRIEVANCE FORM

PERSON REPORTING GRIEVANCE

Name: _____

Phone: _____

Email: _____

LEVEL DIRECTOR REPORTED TO

Name: _____

Email: _____

Date Reported: _____

DESCRIPTION OF GRIEVANCE

Participant(s) charged: _____

Violation: _____

Date(s) of Violation: _____

Location(s) of violation: _____

Time(s) of violation: _____

Other person(s) involved: _____

Witness to violation: _____

Describe in detail the grievance; use a separate sheet of paper if more space is needed. Also attach additional proof or other people's statements of the ethics code violation charge.

COOLING OFF PERIOD

Was the 24 hour "Cooling Off" period observed? Yes No

If no, please explain. _____

COACH(ES) NOTIFICATION

Were the Coach(es) informed of the violation? Yes No

If yes, please give the date and time of notification: _____

If no, please explain. _____

Was the issue resolved? Yes No

If yes, please give brief description of outcome. _____

If no, please explain. _____

Reporting person's signature

Date