

HMIS Grievance Form

HMIS Clients are encouraged to work with the agency they are having issues with before submitting a grievance. A grievance should be used as a last resort. All grievances are taken very seriously and reviewed by the Cambridge CoC and HMIS Lead on an individual basis.

If you have not been able to resolve your issue with the agency directly, please complete this form.

- Complete all fields
- Print legibly
- Be as specific and as detailed as possible
- Attach additional pages as necessary
- Sign and date the form

If you have any questions about completing this form, please call 617-+349-6966 and speak to the Cambridge HMIS System Administrator.

Grievances must be submitted in writing to:

Planning & Development Office
 Department of Human Service Programs
 City of Cambridge
 51 Inman Street
 Cambridge, MA 02139
 Attn: HMIS Administrator

Alternatively, this form may be emailed to PlanningDev@Cambridgema.gov

<p>Name of Agency you've been working with to solve the issue:</p>	<p>Agency Contact Person: list the name of the person you've been working with to solve the issue.</p>

Description of issue. Please use the space below to describe your issue. Please print legibly and be as detailed as possible. Attach additional pages as needed.

Your Name:	Best way to contact you:
Your Phone #:	Your email address:
Your mailing address:	
CoC Response date:	

Recommendation to Agency: