

Hoopa Valley Tribe

Form for Complaint

(Revised 041013)

Title 18 of the Hoopa Tribal Code, the Chairman's Ordinance, places responsibility in the Chairman to *answers and investigate, or appoint staff to do so, complaints or concerns registered by Hoopa Valley Tribal members.* A complaint set forth on this form will be presented to the Chairman for action.

Member's Contact Information (Optional, but required if you want follow-up contact.)

Name:

Phone #:

Address:

Classification of Complaint: (Check all that apply)

Law, Rule, Policy that is:

Problematic

Unfair

Not followed

Needed

Conduct of Tribal Officials or Employees that is

Discrimination

Intimidation

Misconduct

Poor/Denied Service

Reservation/Community Problem Requiring Tribal Action: _____

Other: _____

Type of Complaint or Problem:

Emergency

Non-Emergency

Parties involved List the name of all parties involved with your problem. When your complaint involves tribal officials or staff, list the person's title and department or program.

Name

Title

Department/Program

Statement of Problem Describe your problem below. Sufficient detail must be provided to allow the Chairman to properly route or take action on your issue. (Continue on back if more space is needed.)

(For Official Use only)

Date of Complaint: _____ Time of Complaint: _____ Received and Routed By: _____ (initial)

Date and Time routed to Chairman: _____ via box personal delivery