## Project Grievance Form

Please send completed form to: [radovi.rijekabojana@undp.org](mailto:radovi.rijekabojana@undp.org)

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| --- | --- | --- |
| **Reference No:** | | |
| **Full Name and Surname**  *(You can remain anonymous if you prefer or*  *request not to disclose*  *your identity to the third*  *parties without your consent)* |  | |
| **Contact information:**  *Please mark how you wish to be contacted (mail, telephone, e-mail)* | * **By Post** (Please provide postal address)   **­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   * **By phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** * **By e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Preferred language of communication:** | * **Montenegrin** * **Albanian** * **Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Description of incident/grievance/complaint:** *What happened? Where did it happen? Who did it happen to? What is the result of the problem?* | | |
| **Date of incident/grievance:** | * One-time incident/grievance (date \_\_\_\_\_\_\_\_\_\_\_\_) * Happened more than once/how many times? (\_\_\_\_\_\_) * On-going/currently experiencing problem | |
|  |  | |
| **What would you like to see happen to resolve the problem? Other comments?** | | |
| **Signature:** | | **Date:** |