OFFICE USE ONLY

DATE COMPLAINT OPEN: _____

DATE COMPLAINT CLOSED: _____

BRAZOS COUNTY, TEXAS
TITLE II ADA GRIEVANCE FORM

Brazos County ensures that no person or groups of persons shall on the grounds of race, color, sex, religion, national origin, age, disability, retaliation, or genetic information, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under all programs, services, or activities administered, its recipients, sub-recipients, and contractors. To request an accommodation and/or an alternate format, please contact the Brazos County ADA Coordinator at 979-361-4441

INSTRUCTIONS : Please complete and sign the form and email or mail it to Brazos County within 60 calendar days of any incident to:

Mail:

Brazos County Risk Management
ATTN: ADA Coordinator
200 S. Texas Avenue, Suite 264
Bryan, Texas 77803

Email

riskmanagement@brazoscountytx.gov

1. **TYPE OF GRIEVANCE (check all that apply):**
   _____ Accommodation Request
   _____ Program / Service
   _____ Facility Accessibility
   _____ Other: _____

_____

CONTACT INFORMATION

2. **REPORTING INDIVIDUAL:**

Full Name:	
Address:	
City, State, Zip Code:	
Phone:	Alternate Phone:
Email:	

3. **AUTHORIZED REPRESENTATIVE OF REPORTING INDIVIDUAL (if any):**

Full Name:
Address:

City, State, Zip Code:	
Phone:	Alternate Phone:
Email:	

DETAILS OF COMPLAINT / INCIDENT

4. DATE/TIME OF INCIDENT: _____

5. DEPARTMENT / FACILITY / LOCATION INVOLVED:

6. Describe the incident/complaint with enough detail so the nature of the grievance can be understood. Add additional pages if necessary:

7. Have attempts been made to resolve the complaint through a County Department? If yes, please describe the efforts that have been made.

8. What solution do you feel would resolve the issue?

_____ _____

Signature Date

Attach additional pages as necessary. If you need assistance, require an accessible format, or have questions about this form, please contact the County ADA Coordinator at:

Mail
Brazos County Risk Management
ATTN: ADA Coordinator
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Bryan, Texas 77803

Phone
979-361-4441

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