



# Coordinated Entry System Grievance and Appeals Form

You have the right to file a grievance about the Coordinated Entry (CE) System. If you want to file a grievance, please use this form. TPCH will use this form to address your concerns. This form is confidential. Completing this form will not negatively affect your status in the CE System.

Please print or type the following information:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

HMIS ID# (if applicable): \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred method of contact:      Call      Email

Alternative contact information: \_\_\_\_\_

May we leave confidential information with your alternate contact?      Yes      No

What is this regarding?

- Access to Coordinated Entry System (for example, no housing assessment provided)
- Assessment (for example, your score)
- Prioritization (for example, disagreement with housing designation)
- Housing referral (for example, lack of follow-through by housing provider)
- Other (please be specific)

Note: if you have a grievance about an agency or shelter, please go through their grievance process.

Explain your complaint, grievance, or issue. Please include the names of those involved, agencies (if applicable) and dates. You may use a second sheet if necessary. Please be as specific as possible:

What has been done to fix this (by yourself or others?)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please email this completed form to [TPCH@tucsonaz.gov](mailto:TPCH@tucsonaz.gov) with the subject line "CES Complaint." You can expect a confirmation that the form was received within 5 business days. You should receive a response to the complaint within 10 business days of confirmation that the form was received.



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For Continuum of Care Lead Staff Only

Follow up:

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Notes/comments from CoC Lead staff:

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Recommended solution and/or timeline:

CoC Lead Staff:		Position:	
Date grievance received:		Date grievance resolved:	
Has the grievant been notified of outcome?	Yes	No	N/A
If no or N/A, please explain why:			