In the event that a Moultonborough recreation department staff or volunteer creates a situation that warrants the filing of a formal grievance against them, please fill out this form and return to the recreation department within 72 hours of event.

Grievance Form

Name: __________________________  Date:___________

Phone Number: __________________  Cell: ___________

Nature of Grievance: __________________________

Who was involved: __________________________________

Who witnessed event: _____________________________

What happened : _________________________________

What (if anything) was done to handle the situation: _________

Signature: ______________________________________