

## **Complaint Process**

(Programs at CAP Tulsa)

Everyone deserves to be treated with fairness and respect. CAP Tulsa is committed to providing courteous and professional service to those seeking assistance. Anyone may apply for services or resources, and no one will be denied on the basis of race, color, gender, creed, religion, age, political preference, or disability.

#### Filing a Complaint – Programs at CAP Tulsa

If you have a complaint about an incident or a denial of service:

- 1. Discuss your complaint directly with the program staff involved in the situation.
- 2. If the matter is not resolved, notify the supervisor of the program to discuss the problem. Contact information will be provided by onsite staff, or by calling CAP Tulsa's main office at 918-382-3200.
- 3. If you still are not satisfied, complete the attached *Complaint Form*, and mail or return to:

CAP Tulsa
Attn: Executive Director
5330 E. 31<sup>st</sup> St., Suite 300
Tulsa, OK 74135

If you believe that you have been treated unfairly or disrespectfully, you must submit the *Complaint Form* within 30 days from time of incident to receive a formal response to your complaint.

#### Resolution & Appeals

- 1. Within 10 days of receipt of your written complaint, CAP Tulsa's Executive Director will initiate a process to investigate the situation.
- 2. You will be afforded a reasonable opportunity to have a private and confidential interview, a fair hearing, and access to records relevant to the situation under review with members of leadership.
- 3. Within 30 days of receipt of your written complaint, you will be mailed a *Complaint Ruling* intended to address and resolve your concerns.
- 4. If you are not satisfied with the decision made in response to your complaint, instructions explaining how to appeal the decision to the CAP Tulsa Board of Directors will be enclosed with the *Complaint Ruling*. A copy of the Appeal Process is also available upon request.
- 5. After exhausting the initial appeal option with CAP Tulsa, you may submit a final appeal directly to the Oklahoma Department of Commerce and/or the Office of Head Start Region VI.

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### Complete this form and return to:

CAP Tulsa Attn: Executive Director 5330 E. 31<sup>st</sup> St., Suite 300 Tulsa, OK 74135

Today's Date:/ Date Complaint Originated:/
Name:
Address:
Phone #:
Describe the incident or denial of service:
What happened? (Include the names of people involved and location of events)
Provide or attach any additional information that may be helpful to explain this situation.
I certify that the information provided herein is accurate to the best of my knowledge.
Signature

Your complaint will be reviewed promptly. A written *Complaint Ruling* will be issued within 30 days following receipt of this submitted form. No individual shall be retaliated against for filing a complaint.