**Grievance Submission Form**

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| **Reference Number** |  | | |
| **Date of Incident Grievance ID #**  **Time:** | (dd-mm-yyyy)   * am * pm | | |
| **Full name (optional)**   * I wish to raise my grievance anonymously. * I request not to disclose my identity without my consent**.** |  | | |
| **Contact information**  **Please mark how you wish to be contacted (mail, telephone, e-mail).** | * By Post: *Please provide mailing address:*   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * By telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * By E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Preferred language of communication** | * Albanian * English * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
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| **Description of Incident for Grievance** | | What happened? Where did it happen? Who did it happen to? What is the result of the problem? | |
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| **Status of occurrence** | * One-time incident/grievance (date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) * Happened more than once (how many times? \_\_\_\_\_\_) * On-going (currently experiencing problem) | | |
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| **What would you like to see happen?** | | | |
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| *Contact information for enquiries and grievances:*  **Attention:** Ali Krasniqi  **Digital Transformation Unit**  **Address:**  Mother Theresa Square n.n. 10000 Pristina, Republic of Kosovo  **Tel:** +383 38 200 14018  **E-mail:** [ali.h.krasniqi@rks-gov.net](mailto:ali.h.krasniqi@rks-gov.net) | | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |