



Complaint Form

This form is used to register a complaint regarding a member, guest, Board of Directors, Shoplead or volunteer at the Mankato Makerspace. All information regarding the complainant is confidential.

Information of person registering the complaint

Name

Email

Phone Number

Complaint Information

Date of Incident

Approximate time and location

Person(s) involved

Summary of Incident

What next steps would you like to see happen

Printed name and signature of person filing complaint

For Office Use only

Date received by whom

Personnel Committee

Notes:

Recommended Action:

Board of Directors
**For review of 3 incidents with the same person*

Notes:

Recommended Action:

Action Taken

Date:

By Whom:

Complainant contacted

Date and Time:

By whom:

Final Complaint Outcome