



Grievance Form

This form can be completed by employees and contractors of Capable Therapy. It may be emailed to: tyler@capabletherapy.com or faxed to 888.275.8136. A response to this grievance form will be given within 3 days of receiving form. If you do not receive a response within that time, please call 616.780.0534. Thank you!

Name of person submitting form: _____

Explain the complaint: _____

How did you respond to the situation?

Was the Incident Report Form regarding this situation needed and if so, was it filed with Capable Therapy?

YES _____ NO _____

What can Capable Therapy do to help in this situation?