

Arts Council of Princeton ADA/Grievance Form

Name of Grievant: _____

Person Preparing Complaint (if different from Grievant): _____

Relationship of Preparer to Grievant (if applicable): _____

Address of Grievant: _____

Telephone Number of Grievant: _____ E-mail: _____

Nature of grievance:

Please describe the nature of the specific complaint or grievance, including any incident, barrier, or perceived denial of benefit of any service, program, or activity. Please include the date and as much detail as possible on the location of the alleged violation. Use additional pages or attachments to substantiate your description.

Proposed resolution or accommodation:

Please describe what you believe should be done to resolve the grievance.

Signature of Grievant/Preparer Date

Please return this form in hard copy or e-mail it to:

Adam Welch, ADA Coordinator
Arts Council of Princeton
Princeton, New Jersey, 08542
awelch@artscouncilofprinceton.org