



## Juvenile, Parent, Community Grievance Report

If you have a grievance, complaint, or concern about the services provided, or feel that your child's case has been handled improperly, and you have tried, unsuccessfully, to resolve it informally by talking with Juvenile Services staff members, please answer the following:

1. General Information:

Your Name: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_  
Other Phone # where you can be reached: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Does the grievance involve improper treatment of a child?  YES \_\_\_\_\_  NO \_\_\_\_\_  
What is the child's name: \_\_\_\_\_

2. Have you spoken with anyone in this department in effort to resolve your grievance or concern?

YES \_\_\_\_\_  NO \_\_\_\_\_  
• If YES, please list the name(s) of the person(s) you spoke with \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. When (date & time) did you meet or speak with someone? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

4. Describe your grievance or concern: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BARBARA CULVER JUVENILE  
JUSTICE CENTER**  
(432) 688-4540  
FAX (432) 688-4920  
3800 NORTH LAMESA ROAD  
MIDLAND, TEXAS 79705



**FOREST HANNA**  
DIRECTOR  
**CATHEY CHAVEZ**  
FACILITY ADMINISTRATOR

5. Suggestion(s) for how this grievance or concern should be handled: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(use additional sheets of paper if required)

\_\_\_\_\_  
**Your Signature**

\_\_\_\_\_  
**Today Date**

NOTE: You will be contacted no later than 10 working days from the date this grievance report is received to inform you of what steps or actions have been taken in regard to your grievance or concern.

Please submit form by email, mail, fax or in person to: Email: [juv102@co.midland.tx.us](mailto:juv102@co.midland.tx.us)