



Progressive Community Services

PCS Formal Complaint/Grievance Form

Every person served and their guardian/family member, or PCS employee has the right to voice and/or file complaints and/or grievances and recommend changes in policies and services without restraint, interference, coercion, discrimination, barriers to supports or retaliation.

DATE: _____

REPORTED BY (optional):

Name: _____

Phone Number: _____

Address: _____

PLEASE CIRCLE WHICH DEPARTMENT THIS GRIEVANCE RELATES TO:

Family Navigation / Intake

Quality Enhancement

Support Coordination

Administrative

HUD Housing

PLEASE EXPLAIN THE COMPLAINT/GRIEVANCE: (use back of sheet if needed)

PLEASE INCLUDE YOUR SUGGESTED IMPROVEMENT (OPTIONAL):

PLEASE TURN THIS FORM INTO THE PCS QUALITY OFFICER AT:

Progressive Community Services
Courtney Cruz, Quality Enhancement Manager
1620 North Woodbine Rd.
St. Joseph, MO 64506

You may also email the form to:
ccruz@sb40pcs.com

You can also call in to verbally report at:
(816) 364-3827 x 1108