Department of Human Services
Office of Facilities and Support Services, Transportation Services
Section Complaint Resolution Form

In Reference to the complaint filed by: _____

Dated: _____

Date received by Regional Transportation Office: _____

Subject of the Complaint: _____

Describe the resolution of the complaint. Please include the steps taken to investigate the complaint, corrective actions taken to resolve problems or prevent future reoccurrences, and any related disciplinary actions taken. Use additional pages if needed.

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Date: _____ Signature: _____