

## Tool 5.3: Template for Registering Complaints and Suggestions

1. GRIEVANCE IDENTIFICATION NUMBER		
2. DETAILS OF COMPLAINT		
2.1 When it occurred		
2.2 Where it occurred		
2.3 How it occurred		
2.4 Complainant(s)'s story and expectation		
2.5 Date grievance was recorded		
2.6 Place/method grievance was received		
3. PROFILE OF COMPLAINANT(S)		
3.1 Gender (optional)		
4. CONTACT INFORMATION OF COMPLAINANT(S) OR REPRESENTATIVE		
4.1 Anonymous (Y/N) Through a representative (Y/N)		
4.2 Phone		
4.3 Email		
4.4 Address		

5.1 COMPLAINT NOT ACCEP	TED	Check relevan box
	Clearly not related to the operations of the organization – rejected	
	Labor-related grievances – transfer to Human Resources	
	Commercial disputes – transfer to commercial dispute resolution mechanisms or civil court	
5.1.1 Action taken	Related to governmental policy and institutions – transfer to authorities	
	Other	
5.1.2 Complainant notified (Y/N)		
5.1.3 Method of notification		_
5.1.4 Date of closure		-
5.2 COMPLAINT ACCEPTED		Check relevan box
	Child Labor	
	Forced Labor	
	Occupational Health and Safety	
	Freedom of Association	
	Discrimination	
	Disciplinary Practices	
5.2.1 Category of complaint	Working Hours	
	Wages and Benefits	
	Regular Employment	
	Supervisor(s)/Management	
5.2.2 Photos for evidence		
5.2.3 Type of Resolution	1. Internal (involving relevant teams members)	
	2. Multi-stakeholder oversight body	
	3. Independent mediation	-

5.2.4 Resolution/corrective action taken, including measures to protect complainant from retaliation	
5.2.5 Complainant notified (Y/N)	
5.2.6 Method of notification	
5.2.7 Complainant(s) satisfied or appealed	
5.2.8 Photos and documentary evidence of closure	
5.2.9 Resources spent	
5.2.10 Date of closure	
5.2.11 Number of days from complaint to closure	
6. POST CLOSURE MONITORING R	EQUIRED (Y/N)
6.1 Method and frequency of monitoring required	
6.2. Follow-up monitoring to ensure no retaliation	
7. PREVENTIVE MEASURES TO AV	OID RE-OCCURRENCE
7.1 Suggested preventive actions	