# APPENDIX B SAMPLE GRIEVANCE FORM[1]

**Reference No (for internal use):**

| | |
|---|---|
| **Full Name of Complainant**<br><br>Note: *you can remain anonymous if you prefer or request not to disclose your identity to the third parties without your consent* | First name _____<br>Last name _____<br>❏ I wish to raise my grievance anonymously<br>❏ I request not to disclose my identity without my consent |
| **Contact Information**<br><br>*Please mark how you wish to be contacted (mail, telephone, e-mail).* | ❏ By Post: Please provide mailing address:<br>_____<br>❏ By Telephone: _____<br>❏ By E-mail _____<br>❏ Other: _____ |
| **Preferred Language for communication** | ❏ Lithuanian<br>❏ English<br>❏ Other |
| **Description of Incident or Grievance:** | What happened? Where did it happen? Who did it happen to? What is the result of the problem? |

**Date of Incident/ Grievance**

❏ One time incident/grievance (date _____)

❏ Happened more than once (how many times? _____)

❏ On-going (currently experiencing problem)

**What would you like to see happen to resolve the problem?**

**Signature:** _____

**Date:** _____

**Please return this form to:** Skuodas Cluster Project

**Address:** Ukmergės str. 219, LT07152, Vilnius

**Tel.** +370 6 010 2224

**E-mail:** skuodas@europeanenergy.com

[1] Based on EBRD *Guidance Note on Grievance Management*, 2012