

### Idaho HMIS Grievance Form

If you believe that you have not received the assistance you desire concerning your personal or private data held in the Idaho HMIS, please send a written complaint to:

Director: \_\_\_\_\_ Address: \_\_\_\_\_  
 Agency Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

This agency is prohibited from retaliating against you for filing a complaint.

**Your information and complaint will be kept confidential!** This agency is required by law to maintain the privacy of your protected personal information and to accept and consider grievances.

If you believe your grievance has not been sufficiently resolved by your agency you may make a complaint to:

Idaho Housing and Finance Association  
 Attention: HMIS Grievance  
 P.O. Box 7899  
 Boise, ID 83707-1899

IHFA will attempt a voluntary resolution of the complaint.

NOTE that IHFA does not provide legal services.

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#### GRIEVANCE FORM

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Complaint:** \_\_\_\_\_

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