



Community

MENTAL HEALTH
CLINTON • EATON • INGHAM

RECIPIENT RIGHTS COMPLAINT

INSTRUCTIONS:

If you believe that one of your rights has been violated you (or someone on your behalf) may use this form to make a complaint. A rights officer/advisor will review the complaint and may conduct an investigation. You may drop the form off at: **812 E. Jolly Rd., Lansing, MI 48910** or you can send the original in the mail to: **838 Louisa St., Ste. B, Lansing, MI 48911. Please address it to Attn: Recipient Rights**

Complainant's Name:	Recipient's Name (if different from complainant):
Complainant's Address:	Where did the alleged violation occur?
Complainant's Phone Number:	When did the alleged violation happen? (date and time):

What right was violated?

Describe what happened:

What would you like to have happen in order to correct the violation?

Complainant's Signature	Date	Name of Person Assisting Complainant
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