



## Article XX Complaint Form

***The purpose of this form is to allow the athlete and staff to manage and track the process.***

**Anti-retaliation statement:** Athletes who come forward with a good faith complaint or issue are guaranteed protection against any retribution or retaliation, either direct or indirect, by any USAS Staff member or member of the USAS Board of Directors or any other official associated with USA Shooting.

Date of Report:		Date(s) of Issue:	
Name:		Phone Number:	
E-mail Address:			

**Note:** *Not every issue needs to be resolved by this process. Many issues can be resolved on the spot in conversation with the National Coach or other staff member. Examples: Range schedules, cleaning issues, personal training plan. Allow 72 hours for staff to start the resolution process.*

**Step 1:** Please describe your concern or issue. Use back if necessary or add attachment. Please be sure to list all facts involved. If your concern implicates the Code of Ethics/Code of Conduct, Selection Criteria, and/or Bylaws please reference the section of the document in question. To the extent available, please provide secondary information such as an e-mail, witness statement (with witness contact information, if available), or any other documents or information that could support, explain, or help resolve your claim. **Submit this form to a Board or Committee member and the COO or USAS staff delegate.**

*Issue Involves (circle one):*

Coaching Decision	NGB Administration Decision	Code of Conduct
Other Athlete(s)	Selection Criteria/NGB Bylaws	Other (describe below)

**Details of Concern:**

**Step 2:** Have you tried to resolve the issue with your National Coach or other staff (circle one)?

Yes	No	Not Applicable	Prefer not to contact National Coach or other staff
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**Step 3:** How did the National Coach or other staff respond to your issue or concern?

**Notes:**

**Step 4:** After completing above sections, schedule time to discuss with Director of Operations or designee

	When	How	Location
Meeting Scheduled			
AAC Rep Notified			
Discipline Rep Notified			

**Athlete Concern and Resolution Form Continued (page 2 of 2)**

**Step 5: Meeting with Director of Operations, Athlete, AAC/Discipline Rep, Coach, Other Staff as Pertinent**

Date			
Location			
Attendees			
Confidential	Yes	No	Note: If requested for personal privacy issues

**Discussion/Notes:**

  
  
  
  
  
  
  
  
  
  

**Resolution/Decision:**

  
  
  
  
  
  
  
  
  
  

**Athlete Actions (please check one):**

<input type="checkbox"/>	I accept the resolution or decision above.
<input type="checkbox"/>	I disagree with the resolution or decision above, but will work together to make it work.
<input type="checkbox"/>	I disagree with the resolution or decision above and want to pursue the issue further.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Staff Actions (please check one):**

<input type="checkbox"/>	Resolution or decision above accepted
<input type="checkbox"/>	Case referred to:
<input type="checkbox"/>	Follow up needed (describe and date accomplished):
<input type="checkbox"/>	Case closed

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Copies:</b>	<b>Date Sent</b>	
		Athlete
		Concern File in Director of Operations Office
		AAC and Discipline Athlete Reps
		Other Participants if warranted (please identify)