|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Reference No/ **Redni broj** : |  | | | |
| **Section 1 – Optional /** **Odeljak 1- Opciono**  (Do not fill in if you wish to stay anonymous. Please note that if you stay anonymous we will not be able to inform you of the outcome of this grievance) / (**Ne popunjavati ukoliko želite da ostanete anonimni. Uzmite u obzir da ukoliko želite da ostanete anonimni, nećemo biti u mogućnosti da vas obavestimo o ishodu Vašeg žalbenog zahtev )** | | | | |
| Full Name / **Ime i prezime** |  | | | |
| Contact Information / **Kontakt informacije**  Please mark how you wish to be contacted (mail, telephone, e-mail) / Molimo Vas da naznacite kako zelite da budete kontaktirani (postom, telefonom ili e-mailom) | By Post / **Poštom** : Please provide mailing address / **Molimo Vas da ostavite adresu:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  By Telephone / **Putem telefona**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  By E-mail / **Putem e-maila** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **Section 3 /** **Odeljak 2** |  | | | |
| Description of Inquiry, Incident or Grievance / **Opis zahteva, incidenta ili žalbe :** | | | What happened/ **Šta se dogodilo**? Where did it happen / **Gde se dogodilo?** Who did it happen to / **Kome se dogodilo?** What is the outcome of the problem / **Koji je ishod problema?** | |
|  | | | | |
| Date of Inquiry/Incident/Grievance / **Datum zahteva, incidenta ili žalbe** | |  | | |
|  | | One-time incident/grievance / **Jedinstveni incident/zalb**a (date / **datum** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)  Happened more than once **/ Dogodilo se više puta** (how many times**/ koliko puta? \_\_\_\_\_)**  On-going / **Tekuci** (currently experiencing problem / **stalni problem)** | | |
| **Section 3 /** **Odeljak 3** |  | | | |
| What would you like to see happen to resolve the problem**/ Šta bi ste želeli da ućinimo da bi se problem rešio?** | | | |  |
|  | | | | |