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| --- | --- |
| 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?**  |  |
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