

AEDP Institute Grievance Form

Purpose and Timeline

This grievance form is for filing a grievance with AEDP Institute related to programs or administrative concerns, course content, the speaker, facilities, non-receipt of certificates and other miscellaneous occurrences. Please complete all sections of this form to help us address your concerns effectively. The typical timeline for a response is 30 days from receipt of your completed form.

Confidentiality Statement

All information provided on this form will be treated confidentially and shared only with those directly involved in resolving your grievance. Your privacy is important to us.

Contact Information

Full Name:

Address: _____

City, State/Province, Postal Code: _____

Country: _____

Email: _____

Phone Number: _____

Preferred Contact Method: ☐ Email ☐ Phone ☐ Mail

Previous Contact

Have you already contacted someone at AEDP Institute about this matter? ☐ Yes ☐ No

If yes, please provide:

- **Name of person(s) contacted:**

- **Date of contact:**

- **Outcome of discussion:**

Grievance Details

Date of incident/issue: _____

Program/service related to grievance: _____

Please describe the nature of your grievance in detail: (Include relevant dates, locations, individuals involved, and specific concerns. Be as factual and specific as possible.)

Supporting documentation: Please list and attach any relevant documents (emails, receipts, communications, etc.)

Personal Impact

Please describe how this incident or issue has affected you: (This helps us understand the gravity of the situation and respond appropriately)

Desired Resolution

What would you consider to be a satisfactory resolution to your grievance? (Please be specific about what outcome you are seeking)

Declaration

By signing below, I declare that the information provided in this grievance is true and accurate to the best of my knowledge. I understand that AEDP Institute may need to share this information with relevant parties to investigate and resolve my grievance.

Signature: _____

Date: _____

Submission Instructions

Please submit your completed form by:

- **Mail:** AEDP Institute, Attn: Grievances Department 225 Broadway, Suite 3400 New York, NY 10007
- **Online:** You may also complete this form digitally through our secure portal at www.aedpinstitute.org/grievance

Next Steps

1. Your grievance will be assigned to the appropriate Administrative Director
2. Investigation of your grievance will be conducted
3. A formal response will typically be provided within 30 days
4. If you are not satisfied with the resolution, you may submit an appeal as outlined in our Grievance Policy

For questions about the complaint process, please email admin@aedpinstitute.org