

ATASCOSA COUNTY JUVENILE JUSTICE CENTER
PARENT/COMMUNITY GRIEVANCE FORM §115.352(e)(4)

Your Name: _____
Please Print

Date: _____

Contact Phone #: _____

Does this grievance concern your child? ☐ YES ☐ NO

State your grievance in detail. Please include date, time, & place:

(Use additional sheets of paper if necessary)

Who (department employee(s)) did you notify in an effort to resolve this grievance? Please state the date(s) and time(s) you spoke with this person.

What do you think should be done to resolve this grievance?

(Use additional sheets of paper if necessary)

ATASCOSA COUNTY JUVENILE JUSTICE CENTER PARENT/COMMUNITY GRIEVANCE FORM
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Please submit this form by mail, email, or in person to:

☐ Timothy Gutierrez, Facility Administrator/Major email: [tgutierrez @atascosajuv.com](mailto:tgutierrez@atascosajuv.com)

☐ Bill Gamez, Chief Juvenile Probation Officer email: [bgamez @atascosajuv.com](mailto:bgamez@atascosajuv.com)

Atascosa County Juvenile Justice Center
1511 Zanderson
Jourdanton, Tx 78026
Phone: (830) 769-3900 ext. 5101
Fax: (830) 769-3168

The above Administrator(s) will contact you no later than ten (10) working days from the date they receive this grievance to inform you of the steps or action(s) taken to resolve this issue.

I, the undersigned, acknowledge that the facts stated in this grievance are true and correct. I fully understand that I will be held accountable for any false statement.

Your Signature

Date