



Grievance Form

Authorized Provider
of CPR and ECC Courses



The following form should be completed in order to file a grievance with the National EMS Academy.

After completion, the original form should be mailed to:

National EMS Academy
Attn: Training Center Coordinator
2916 North University
Lafayette, LA 70501

Complainant

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Training site or individual against which the complaint is brought:

Name: _____

Address: _____

Attach the following information:

- A detailed written description of the dispute, complaint, or problem (include date of occurrence)
- Copies of all related correspondence, records, and other documentation
- Documentation on the attempts of the Training Site Coordinator to resolve the matter.

Reference the rule, standard and /or guideline the complainant believes was violated, if possible:

Complainant Signature

Date