



WASHTENAW COUNTY HMIS/SERVICEPOINT INQUIRY/ GRIEVANCE FORM

Purpose of this Form

- To submit a question or concern about the privacy, access, or accuracy of your electronic record with Washtenaw County HMIS/ServicePoint
- To file a written complaint or grievance about your privacy rights with this agency or its staff

Your Name (optional): _____

Name of Agency or Program: _____

Agency staff (if applicable): _____

Do you have a question or concern?

If you have you have a question or concern about your privacy rights and the use of your personal information in ServicePoint, please tell us about it below:



**OFFICE OF COMMUNITY &
ECONOMIC DEVELOPMENT**

Collaborative solutions for a promising future

415 West Michigan Avenue · Second Floor
Ypsilanti · MI 48197
Phone|734.544.6748 Fax|734.544.6749
Website|www.ewashtenaw.org/oced

Do you have a grievance or complaint?

If you have a grievance or complaint, please tell us about it below:

Can we contact you?

Please provide as much contact information as possible. Do not complete this section if you want to remain anonymous, or do not want to be contacted.

Name: _____

Address: _____

City, State & Zip Code: _____

Telephone No: _____

Other Contact Info. _____

PLEASE SEND THIS COMPLETED FORM TO:

Office of Community & Economic Development

Attn: HMIS System Administrator

415 West Michigan Avenue, Second Floor

Ypsilanti, MI 48197

We will respond to your request within ten business days.