



COHMIS Client Grievance Form

Filing a Grievance about COHMIS Privacy Practices

- If you think your privacy rights have been violated, or you disagree with a decision made about access to your “Personally Identifiable Information,” you may complete this form.
- It is against the law for any agency to take punitive action against you if you file this grievance.
- You can expect a response within 30 days via the method of your choice.

Grievances must be submitted in writing to:

CoC Name: _____

Attn: COHMIS System Administrator

Address: _____

City, State, Zip: _____

Grievance Details:

Date of occurrence: _____

Individual who you believe violated your privacy rights: _____

Agency that you believe violated your privacy rights: _____

Brief description of what happened (continue on back if needed):

Best way to contact you: _____

Name: _____

Phone: _____

Mailing address: _____

We collect personal information directly from you for reasons that are discussed in our privacy notice. We may be required to collect some personal information by law or by organizations that give us money to operate this program. Other personal information that we collect is important to run our programs, to improve services for individuals and families in need, and to better understand the needs of those individuals and families. We only collect information that we would consider to be appropriate.