



Athlete Concern and Resolution Report

The purpose of this form is to allow the athlete and staff to manage and track the process

Date of Report:		Date(s) of Issue:	
Name:		Phone Number:	
E-mail Address:			

Note: *Not every issue needs to be resolved by this process. Many issues can be resolved on the spot in conversation with the National Coach or other staff member. Examples: Range schedules, cleaning issues, personal training plan. Allow 72 hours for staff to start the resolution process.*

Step 1: Please describe your concern or issue. Use back if necessary or add attachment. Please be sure to list all facts involved. If your concern implicates the Code of Ethics/Code of Conduct, Selection Criteria, and/or Bylaws please reference the section of the document in question. To the extent available, please provide secondary information such as an e-mail, witness statement (with witness contact information, if available), or any other documents or information that could support, explain, or help resolve your claim.

Issue Involves (circle one):

Coaching Decision	NGB Administration Decision	Code of Conduct
Other Athlete(s)	Selection Criteria/NGB Bylaws	Other (describe below)

Details of Concern:

Step 2: Have you tried to resolve the issue with your National Coach or other staff (circle one)?

Yes	No	Not Applicable	Prefer not to contact National Coach or other staff
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Step 3: How did the National Coach or other staff respond to your issue or concern?

Notes:

Step 4: After completing above sections, schedule time to discuss with Director of Operations or designee

	When	How	Location
Meeting Scheduled			
AAC Rep Notified			
Discipline Rep Notified			

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Step 5: Meeting with Director of Operations, Athlete, AAC/Discipline Rep, Coach, Other Staff as Pertinent

Date			
Location			
Attendees			
Confidential	Yes	No	Note: If requested for personal privacy issues

Discussion/Notes:

Resolution/Decision:

Athlete Actions (please check one):

<input type="checkbox"/>	I accept the resolution or decision above.
<input type="checkbox"/>	I disagree with the resolution or decision above, but will work together to make it work.
<input type="checkbox"/>	I disagree with the resolution or decision above and want to pursue the issue further.

Signature: _____ Date: _____

Staff Actions (please check one):

<input type="checkbox"/>	Resolution or decision above accepted
<input type="checkbox"/>	Case referred to:
<input type="checkbox"/>	Follow up needed (describe and date accomplished):
<input type="checkbox"/>	Case closed

Signature: _____ Date: _____

Copies:	Date Sent		
		Athlete	
		Concern File in Director of Operations Office	
		AAC and Discipline Athlete Reps	
	Other Participants if warranted (please identify)		