**BUTTE COUNTY FIRE DEPARTMENT**

VFF COMPLAINT FORM

Grievance  Complaint  Harassment  Discrimination

Informal  Formal (File a formal complaint directly to the Fire Chief or outside

the department)

VFF Name:       VFC:

Date of incident:

ISSUE: (Please explain issue fully – use attachments if necessary)

**INFORMAL**

Date discussed with Volunteer Captain:       Name:

Date discussed with Volunteer Liaison Officer:       Name:

Date discussed with Career Captain:       Name:

Date grievance/complaint delivered to Battalion Chief:

BC Name:

Informal level Decision:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Battalion Chief (Signature) Date returned to VFF:

VFF Response to first level decision:

**FORMAL**

Date forwarded to fire chief:

Date discussed with fire chief:

Formal level Decision:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fire Chief (Signature) Date returned to VFF:

(The Fire Chiefs decision is final)