

**Must Be Submitted Through the Law Library or Designee
Inmate/Offender Grievance Process
REQUEST TO STAFF**

TO: _____ FACILITY/UNIT: _____ DATE: _____
(NAME AND TITLE OF STAFF MEMBER)

I have ___ have not ___ already submitted a "Request to Staff" or grievance on this same issue.
If yes, what date: _____ facility: _____ grievance #: _____
I affirm that I do ___ do not ___ have a grievance pending on this issue.
I affirm that I do ___ do not ___ have a lawsuit of any type pending that relates in any way to this issue.
If a lawsuit is pending, indicate case number and court: _____
This request ___ does ___ does not relate to a pending misconduct report. If it does, this request may only be answered by the disciplinary coordinator assigned to the misconduct.

SUBJECT: State completely, but briefly, the problem on which you desire assistance. This statement must be specific as to the complaint, dates, places, personnel involved, and how you were affected. One issue or incident per "Request to Staff." Your failure to specifically state your problem may result in this being returned unanswered.

(USE OTHER SIDE IF MORE SPACE IS NEEDED. DO NOT ATTACH ADDITIONAL PAGES.)

ACTION REQUESTED: State exactly how you believe your request may be handled; that is, what exactly should be done and how.

NAME: _____ DOC NUMBER: _____ UNIT & CELL NUMBER: _____
(PRINT)

SIGNATURE: _____ WORK ASSIGNMENT: _____

DO NOT WRITE BELOW THIS LINE

DISPOSITION:

STAFF MEMBER

DATE

Date response sent to inmate/offender: _____

- 1. Original to file
- 2. Copy to inmate/offender