

# NARHA GRIEVANCE SUBMISSION FORM

## Onsite workshops & certification and Approved Training Course

Thank you so much for your attention to the standards of our NARHA member centers and instructors. NARHA is constantly striving to uphold the highest levels of safety, ethics and effectiveness in the field of equine-assisted activities and therapy at its centers and programs, and it is the concern and diligence of people like you that allows us to maintain these high standards.

If you have a complaint regarding the conduct of a NARHA member center, NARHA instructor or a program participant, please fill out the appropriate information below and briefly describe your concerns. We will carefully read and consider your comments, and if action needs to be taken we will speak with those involved.

Your identity is a requirement but be assured it will remain anonymous to the center or individual in question throughout this process.

This grievance form should only be used to report unsafe, unethical or unfair conduct on the part of a NARHA accredited center or NARHA certified staff. Please **DO NOT** use this form to contest the results of your exam, site visit or certification: if you have a question about the outcome of your accreditation or certification process, please contact Tara McChesney at 1-800-369-7433x114.

NARHA takes every complaint seriously and will take every step necessary to ensure the safety of our participants and integrity of our members, please be aware that we are not always able to personally investigate or visit those in question. We will, however, do everything in our capacity to resolve the issue.

Again, thank you for your dedication to safe, fair and ethical behavior in the field of Equine Assisted Activities and Therapy (EAAT) and maintaining the integrity of NARHA and NARHA members.

### **INSTRUCTIONS:**

Please check the appropriate box and fill in as complete as possible. **(\* = required information)**

If you have multiple grievances please fill out a separate form for each.

**Onsite workshop & certification host**

HOST SITE\* \_\_\_\_\_

FACILITIES  EQUIPMENT  ANIMALS  OTHER

**Onsite workshop & certification faculty**

HOST AFFILIATION\* \_\_\_\_\_

CERTIFICATION  CODE OF CONDUCT  SAFETY  OTHER

**Approved Training Course**

CENTER AFFILIATION\* \_\_\_\_\_

FACULTY  SAFETY  EQUIPMENT  ANIMALS  FACILITIES  OTHER

**Please keep your description brief, you may use the back of this form**

### **CONTACT INFORMATION \***

\*NAME \_\_\_\_\_ \*ADDRESS \_\_\_\_\_

\*E-MAIL \_\_\_\_\_ \*PHONE work \_\_\_\_\_ cell \_\_\_\_\_ home \_\_\_\_\_

If you need to submit any additional information ex: pictures, articles, or documentation please feel free to do so. Send all inquiries to:

**NARHA "CONFIDENTIAL" PO BOX 33150 DENVER, CO 80233**

