



## Village of Glen Carbon ADA Grievance Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Please provide a complete description of your grievance:**

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**Please specify the location of your grievance:**

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**Please state what you think should be done to resolve the grievance:**

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## Village of Glen Carbon ADA Grievance Form

Please attach additional pages or photo(s) as needed.

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Signature:

Date:

Please return to:

Jamie Bowden  
Village Administrator  
151 North Main Street  
Glen Carbon, IL 62034

Upon request, reasonable accommodations will be provided in completing this form. Contact Jamie Bowden, Village Administrator, (618) 288-2614, [jbowden@glen-carbon.il.us](mailto:jbowden@glen-carbon.il.us).