

**TRAINER COMPLAINT FORM**

Please use this form to report a complaint against any trainer delivering professional development to the DC early care and education (ECE) workforce. Once completed, email the form to [OSSE.TrainerComplaints@dc.gov](mailto:OSSE.TrainerComplaints@dc.gov). If you wish to remain anonymous, please note this in your email. The name and email address used to submit the complaint will be deleted from the official record of the complaint. If you have any questions, please contact DC Child Care Connections at OSSE.DCchildcareconnections@dc.gov or (202) 678-0027.

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| **Part I – Information about person reporting incident** | |
| Name of person reporting incident | Click here to enter text. |
| Email address | Click here to enter text. |
| Phone number at which person can be reached | Click here to enter text. |
| Name of employer | Click here to enter text. |
| **Part II – Complaint** | |
| Name of trainer | Click here to enter text. |
| Name of training (if applicable) | Click here to enter text. |
| Date of incident | Click here to enter a date. |
| Complaint | Click here to enter text. |