

Grayslake Community Park District CITIZEN COMMENT FORM

We welcome any suggestions or remarks concerning our parks, programs, facilities or personnel.

Suggestions/Remarks (please include date, time, location and any other information provided by citizen. Use the back of this form for additional space).

Individual's Name: _____

Employee Taking Call: _____

Address: _____

Date: _____ Time: _____

Phone _____ In Person _____

Phone Number: _____

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Given to Director on: _____

Reviewed by Director on: _____

Referred to (staff member) by Director: _____

Date: _____

Action/Comment by Employee assigned this Suggestion/Remark: _____

Was citizen notified? _____ How? _____ By who? _____ Date: _____

Provided to _____ Board/Committee Agenda Date: _____

All notes and other documentation should be attached to this form. Should additional space be needed, please use the back of this form or additional sheets. RETURN TO EXECUTIVE DIRECTOR A.S.A.P. OR WITHIN 48 HOURS OF CITIZEN CONTACT.