Girl Scouts of Greater South Texas
202 E. Madison, Harlingen, Texas 78550
Behavior Complaint Form

Date: _____ ____Staff ____Volunteer

Name: _____

Address: _____

City, State, Zip _____ Phone ( ) _____

Behavior Incident:

Report taken by:_____

Title:_____

Action taken:_____

Copies to: ____Chief Executive Officer
____ Chief Operations Officer
____ Chief Financial Officer
___Director of Human Resources
___Director of Membership Services