

[insert organisation name/logo]

Feedback and Complaints Form

Date feedback / complaint received: _____

Feedback / complaint received by (staff name): _____

Name of person giving feedback / complaint: _____

Address: _____

Phone: _____ Mobile: _____ Other: _____

Email: _____

feedback / complaint made on behalf of someone else.

If so, who? _____

Details of the feedback / complaint:

(Please be as specific as possible with reference to dates, times, people and locations)

Please attach anything that may help us to resolve your complaint, eg correspondence

Feedback / complaint received by: _____ Date: _____

Feedback / complaint noted on [compliments] and Complaints Register Date: _____

Complaints

Original complaint documentation attached

Date complainant sent written advice of receipt of complaint: _____

Action to be taken

| Date | Action | Responsibility |
|------|--------|----------------|
| | | |
| | | |

Date complainant contacted about action resulting from complaint: _____

Outcome

Follow-up

Other comments