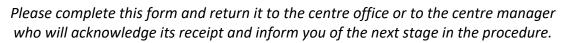
Formal Complaint Form





Your name:	de activity centr
Relationship with centre (e.g. client):	
Contact number/e-mail address:	
Please give concise details of your complaint, (including dates, names of witnesses etc), to allow t matter to be fully investigated:	he
You may continue on separate paper, or attach additional documents, if you wish. Number of additional pages attached:	

What action, if any, have you already taken to try to resolve your complaint? (i.e. who have you spoken with or written to and what was the outcome?)					
What actions do you feel a	might resolve the problem	at this stage?			
What actions do you reer i	ingit resolve the problem	at tills stage:			
Signed		Date			
Centre use only:					
Date Form received:					
Received by:					
Date acknowledgement ser	nt:				
Acknowledgement sent by	/:				
Complaint referred to:					
Date:					