|  |
| --- |
| Community Complaint Form |
| Name: |       |
| Address: |       |
| Telephone: |       |
| Email: |       |
| Nature of Complaint |
|       |
| Did you discuss your concern with a staff member?  | [ ]  Yes [ ]  No |
| If yes, staff member’s name: |       |
| Do you wish to be contacted regarding the outcome of this complaint?  | [ ]  Yes [ ]  No |
| How do you prefer to be contacted: |  [ ]  Telephone [ ]  Email [ ]  Mail |