# Feedback Complaints and Suggestions Form



#### For the purpose of this document, the term "complainant" refers to:

- A Supports for Living Participant, their parent(s), advocate(s), carer(s) or significant other(s);
- Members of the Community;
- Other services or organisations;
- Other interested parties

#### 1. Details:

Is this a:	Complaint (formal)			
		Suggest	tion	
		Genera	l Feedback	
Complainant's Name:				
(optional)				
l am:	(please place an x in applicable box)			
	A Support Coordination Service Participant			
	□ Nominee/Carer/Guardian			
	An Advocate			
	Member of the Public			
	<ul> <li>Other (please specify)</li> </ul>			
Address:			· · ·	
			Γ	1
Telephone Number:			Email Address:	
Mobile Number:			Fax Number:	
Is this form being	(please pla	ace an x ii	n applicable box)	I
completed by:				
		•	ainant (Go to Section 2)	
	Parent/Guardian (Go to Section 3)			
	An Advocate (Go to Section 3)			
	Other (please specify) (Go to Section 3)			
		<u> </u>		

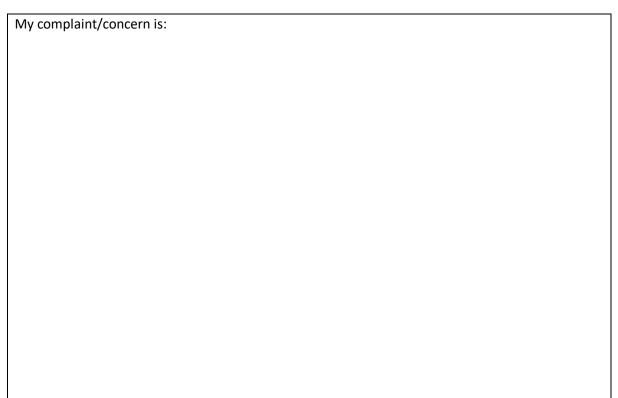
#### 2. Complainant to Answer:

Have you read the Supports for Living Complaints Procedure? If no please take the opportunity to read before proceeding with the complaint.		Yes No
Are you aware of your right to have parent(s)/advocate or support person involved in the complaint process? If no please note that you have the right to have parent(s), advocate or support person involved.		Yes No

## **3.** Please complete this section if you want to involve a Nominee, advocate or support person in the complaint resolution process:

Name of support person:	
Contact Number:	
Would you like assistance from an advocate group?	<ul> <li>Yes</li> <li>No</li> <li>If yes, please specify name of group if known.</li> </ul>

### 4. Please provide details of your Feedback or complaint here:



Date of Incident:		Time of Incident:		
Location of Incident:				
Is there supporting do provided for this comp				Yes No
What would you like to	o see as the outcome of	this complaint/conce	ern?	

### 5. Acknowledgement:

All of the information provided above is true and correct to the best of my knowledge				
Print Name	Signature	Date		