
COMPLAINT & APPEALS

QAFRM

Details of person making the complaint or appeal:¹

Name:.....

Address:.....

.....

Phone number:.....

Details of complaint or appeal:

Signature:.....

Date:.....

Office Use Only

Complaint or appeal referred to:

Name:.....Date:.....

Action/decision:

¹ GEALC will abide by its privacy policy in regard to the collection and dissemination of personal information. Refer to the Policy Manual Section 8.12