COMPLAINTS & 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