



## Complaints Form

Name of the person with the complaint. (You can make a complaint without providing your name. However it is preferable to provide your name so that NMLL can communicate with you).

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Male  Female

Address: .....

.....

Phone Number: ..... Date of Birth: .....

Are you enrolled at NMLL? Yes/No. Are you a [participant in a community activity? Yes/No. Are you a visitor to NMLL? Yes/No.

Date & time of complaint: .....

Summary of the complaint: .....

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Name of any witnesses: .....

What were the affects? .....

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Any other contributing factors: .....

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Recommendations for responding to complaint:.....  
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 .....  
 .....  
 .....  
 .....  
 .....

Name of Person receiving complaint: .....  
 Date:

Follow up actions taken? List & date

| Date | Action Taken | Person making complaint informed? |
|------|--------------|-----------------------------------|
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