

Complaints Form

name. However it is preferable to provide your name so that NMLL can communicate with you).
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:
Name of any witnesses:
What were the affects?
Any other contributing factors:

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Template Number: T-04 Form Number: F-09

Implementation Date: nn/nn/nn

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North Melbourne Language & Learning

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Recommendations for respond	ding to complaint:		
Name of Person <u>receiving</u> con Date: Follow up actions taken? List &			
Date	Action Taken	Person mainformed?	aking complaint

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