

Anonymous Complaints & Feedback Form

Instructions:

- 1. Complete this form.
- 2. Remember do not include your name if you prefer to remain anonymous.
- 3. Forward with any relevant information to our Senior Manager using the following contact details:

Organisation Name:	Courageous Minds
Email Address:	Lucy@courageousminds.com.au
Postal Address	15 Dawson Street South, Ballarat, VIC, 3350

Who is the person, or what is the service, about whom you are complaining or providing eedback about?
Name or Person or Service:
Does the person (if applicable) know you are making this complaint/providing feedback? ☐ Yes ☐ No
What is your Complaint/Feedback about? Please provide relevant details to help us understand your concerns. nclude what happened, where it happened, the time it happened and who was involved.
Supporting Information Please attach copies of any documentation that may help us to investigate your complaint/feedback for example letters, references, emails)





What outcomes are you seeking because of the complaint/feedback?	



OFFICE USE ONLY

Date complaint received:	
Action taken or required:	
Date action completed:	
Name of organisation Representative:	
Role/Position title:	
Signature:	