**Attachment A**

#  FORMAL COMPLAINT FORM

1. **Who or what do you want to tell us about? (tick boxes):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Course leader** | **Process** | **Access**  | **Course** | **Other** |

1. **What would you like to tell us?**  Please include dates, times, places and people, if relevant to your complaint.

# …………………………………………………………………………………………..

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1. **What would you like to happen? (tick boxes)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Apology** | **Explanation** | **Change** | **Information** | **Other** |

1. **I have already spoken to the other people involved in this complaint. (tick box)**

|  |  |
| --- | --- |
| **Yes** | **No** |

1. **Would you like us to contact you about this matter? (Tick box)**

|  |  |
| --- | --- |
| **Yes** | **No** |

***If you choose not to provide your name and contact details, we investigate your complaint, but will not be able to let you know of the outcome.***

1. **Your name: ………………………………………………………………………………….**
2. **Your phone number: ……………………………………………………………………….**
3. **Your email address: ………………………………………………………………………..**
4. **Your U3A membership number: …………………………………………………………**
5. **Date: …………………………………………………………………………………………..**

**Please forward this document to The Secretary U3A-ACT Inc. at**  **secretary@u3acanberra.org.au** **or to 2 Wisdom Street Hughes ACT 2600**