

Parent Complaint Form

Full Name: _____ Contact Number: _____

Preferred Contact: Phone Email In Person Email: _____

Enrolled Child's Name: _____ Child's Room: _____

Complaint details:

Please provide specific details of what your complaint is about, and when the matter(s) involved occurred. Providing as much detail as possible will assist us in investigating your complaint. If necessary, you may attach extra pages or material to this form.

Have you previously discussed this matter with a staff member? Yes No

If yes, please specify the date(s) and the staff member(s) whom you spoke with?

What was the outcome from your discussion?

Do you have any suggested solution to this matter?

Signature: _____ Date: _____

Please place completed form in secured suggestion box located in foyer or hand to a staff member in a **sealed envelope** marked "To the Director". Alternatively you can email this form to the centre Director.

Privacy Note:

The information in your complaint, including your name, will be disclosed to the relevant staff member concerned during the course of investigating your complaint. If you do not include your name and contact details we will investigate your complaint, however will not be able to inform you of the outcome.

OFFICE USE ONLY

Received by: _____ Date: _____

Complaint handled by: _____ Position: _____

Action taken in investigating complaint:

Outcome/Resolution:

Staff Signature: _____ Date: _____

Date complainant notified: _____ Notified by: Phone Email In Person

Complainants' response to outcome/resolution:

Director's Signature: _____ Date: _____

Approved Provider's Signature: _____ Date: _____