

Capricorn Citizen Advocacy

COMPLAINTS FORM

Form Number:	5.0.1.1	Approved by Management Committee:	27 th March 2024
Version:	1.0	Signed off by Executive:	27 th March 2024
Responsible person:	President	Scheduled Review Date:	27 th March 2027

This form should be used to make a complaint about the conduct of, or services delivered by, Capricorn Citizen Advocacy (CCA). It is recommended that you read CCA's Complaints Policy 500 & Complaints Procedure 5010 first. These can be found on CCA's website at: <https://www.capca.org.au/resources/policies-and-procedures/> You can request a copy be emailed or posted to you.

ABOUT YOU

Name of person for whom complaint is made: _____

Name of person making the complaint: _____ or As Above

Phone number: _____ Email: _____

Address for correspondence: _____

Your role if submitting complaint on another person's behalf:

- | | |
|---|---|
| <input type="checkbox"/> Guardian | <input type="checkbox"/> Administrator |
| <input type="checkbox"/> Enduring Power of Attorney | <input type="checkbox"/> Family <input type="checkbox"/> Friend |
| <input type="checkbox"/> Service Provider | <input type="checkbox"/> Other _____ |

COMPLAINT DETAILS

Please write as much information as you can about the nature of the complaint, setting out the order in which things happened. Include the matter/s being complained about, date/s, time/s, location/s, witness/es & their contact details, name of person/s being complained about (respondent/s) and their role/s. Please add any other details that will assist our investigation, including any action you have already taken about this matter so far.

HOW HAS THIS MATTER IMPACTED ON YOU OR ANOTHER PARTY?

WHAT YOU WOULD LIKE TO HAPPEN OR HOW WOULD YOU LIKE THIS FIXED?

The information provided above is true and correct to the extent of my knowledge at this time. I have accessed or been provided with a copy of CCA's Complaints Policy & Procedure.

Signed _____ Date _____

Witness _____ Date _____

Email this Complaint Form to: office@capricornca.org.au or **Post** to: PO Box 1175, Rockhampton Qld 4700.

This complaint will be acknowledged promptly (usually within 3 working days) and investigated in a timely manner. A Record of Complaint will be kept in a confidential complaint file at the office of CCA. A full copy of this Record of Complaint will be given to the complainant and any person involved in the complaint (including a respondent if relevant).

Ratification

This policy was adopted by Capricorn Citizen Advocacy's Management Committee at its meeting held on 27 / 03 / 2024.

SIGNED: 
.....
President

27 / 03 / 2024
(Date)

SIGNED: 
.....
Secretary

27 / 03 / 2024
(Date)