COMPLAINTS / FEEDBACK FORM

For children and young people, and consumers of CREATE

Would you like to:	Provide Feedback	Make a Complaint
Name:	Date:	
Contact Details:	,	
-	ed your feedback or complaint with the staff n	nember or program in question?
Yes	No	
	k or Complaint happened, include the date and where you we ed to resolve the issue.	re. Let us know how you feel about it,
Who is the feedba	ck/complaint about?	
Details:		
NOTE: Please attach ad What would you li	Iditional information if this space is not adequate for your ke to see happen?	response.
Would you be ope	n to mediation to resolve your complaint?	Yes No
Signature	Signature o (if applicable	f CREATE Staff receiving the complaint e)
You can send your your nearest CREA	completed complaint/ feedback form to hr@cr TE office	reate.org.au or simply drop off at
Date Received:		