



Client Complaint form

**1: Tell us about you**

First name \_\_\_\_\_

Last name \_\_\_\_\_



Address \_\_\_\_\_

\_\_\_\_\_



Home Phone: \_\_\_\_\_



Mobile Phone: \_\_\_\_\_



Email: \_\_\_\_\_

**2: Tell us about your complaint: Who are you unhappy with?**



Emma



Zac



Arielle



Wendi



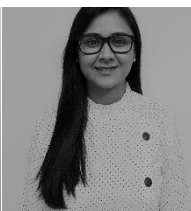
Lisa



Alan



Elise



Sukrita



Sophie



Ebony



Dimyana



### What made you unhappy?



Tell us what happened.

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### When did it happen?



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### What would make you happy?



Tell us what you would like to happen.

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**We might need to talk to you to help fix your problem. Are you okay with this?**

**Circle your answer (or delete the other answer).**



**Yes**



**No**



**Manager - Outcome:**

**FOLLOW UP:**

Clients response to the resolution:

Client suggestions for improving the complaints process: