

# Complaint Compliment and Feedback Form



Please refer to the Complaints and Feedback Policy / Procedure for more information

**Personal Information** (optional – please complete if you would like us to contact you about this complaint, compliment or feedback suggestion)

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home No: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Are you of Aboriginal or Torres Strait Islander Origin? Or Both?

No  Yes – Aboriginal  Yes – Torres Strait Islander

Do you speak a language other than English at home?  Yes  No

If Yes, do you require an interpreter when discussing this matter?  Yes  No

If Yes, Please specify language or alternative communication requirements: \_\_\_\_\_

Consent for Able Australia staff to contact you:  Yes  No

**My Complaint/ Compliment / Feedback Suggestion:** Provide a short summary of your complaint / compliment / feedback suggestion. It is useful to include what happened, when it happened and who was involved. If you need more space, please attach a separate page to the back of this form. Please also attach any relevant documents you have and are willing to share.

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The main issues I am concerned about are:

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Please send the complaint / compliment / feedback suggestion and supporting information (if available) to: **‘Complaints Officer’ Able Australia, Locked Bag 4000, Surrey Hills, Victoria 3127 or email: [feedback@ableaustralia.org.au](mailto:feedback@ableaustralia.org.au)**  
**Please note:** that it is an offence for a person to provide false or misleading information.  
**Privacy Statement:** Able Australia will not disclose any information provided by you other than in carrying out its functions to resolve your complaint / feedback suggestion.