

PO Box 2082, Elizabeth Park SA 5113

Phone: 0434 619 017

<u>admin@interactiveplanmanagement.com.au</u> www.interactiveplanmanagement.com.au

Complaint and Grievances Form

Your details:
Title:
First name:
Last name:
Address:
Suburb:
State / Territory:
Postcode:
Email:
Phone (after hours):
Phone (Business hours):
Mobile:
Do you require a Translator?
If yes, Translator Type:
Do you require assistance to participate in the complaint process?
If yes, please explain the type of assistance you need:
Are you making this complaint on behalf of someone else (the aggrieved person)?



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If yes, please provide details:
Title:
First name:
Last name:
What is their relationship to you?
Do you have a legal representative or advocate?
If yes, please provide details:
Title:
First name:
Last name:
Position:
Organisation:
Address:
Suburb:
State / Territory:
Postcode:
Email:
Phone (business hours):
Mobile:
Do you wish to make a complaint about a staff member of IPM?
If yes, provide name of staff member:



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What is your complaint? Please provide d	etails			
When did the alleged event(s) happen?				
Do you wish to provide Supporting Information?				
If yes, please provide details of attached of	documentation:			
Other Information:				
How do you think this complaint could be	resolved?			
Name	Signature	Date		

Thank you for taking the time to complete this complaint form. An IPM representative will be in contact with you to discuss your complaint and ensure all reasonable steps are taken to resolve this complaint. Please call us on 0434 619 017 if you wish to discuss the progress of your complaint.