

CUSTOMER COMPLAINT FORM

When you have a complaint, we'll do our best to address your concern. Tell us what happened in the form below

Section 1: CUSTOMER DETAILS

Name:

Email:

Phone Number:

Address:

Section 2: COMPLAINT DETAILS

Date of Incident

Nature of Complaint

OTHER

Location

ENTER NAME OF PROGRAM/SITE

**Summary of
Complaint/
Feedback:**

**Expected
Outcome/
Resolution:**

Section 3: CERTIFICATION DETAILS

YWCA Hamilton's policy requires the complainant to speak directly to the person or department with whom he/she has the complaint. If you do not feel safe to speak with the person please speak directly to their Supervisor within 10 working days of the incident or concern. If you are not satisfied with the response of the Supervisor to your complaint, you can speak to the Manager of that department or use this form to put your complaint in writing. The information that you provide using this form will be used to resolve your complaint. By using this form you understand that we collect personal information. The personal information that we collect includes: Your full name, E-mail address, Phone number, and Address. All complaints submitted using this form will be reviewed and a response will be received within 10 working days. Please note, this may also involve redirecting your complaint to another person or department better suited to meet your needs.

If you **do not** accept, YWCA Hamilton will not proceed with your complaint

By clicking, I

ENTER FIRST AND LAST NAME

Declare that on this date

Certify that all the information given is accurate, truthful and in accordance with YWCA Hamilton's Clients, Members and Community Members Protocol. I have read and I am in agreement with the statements above.

Please let us know if you need help completing this form