



FORMAL COMPLAINT FORM

Name: _____

Address: _____

Tel: _____

Email: _____

If making the complaint on behalf of another person:

Relationship to other
person: _____

Name of other person: _____

Nature of complaint:
(someone will contact you to take full details)

What have you already done to try to resolve the concern / issue?

What would you like to see happen as a result of making this complaint?

I require an interpreter / special support:
(if yes, please indicate the support you may require)

Yes / No

I require the support of an advocate:
(if yes, please indicate if you already have an advocate and give their details)

Yes / No

Signature: _____ Date: _____

Complaints will be treated in a sensitive and confidential manner, subject to any disclosure that might be necessary to the authorities in France or the UK.