



Concern & Complaint Recording Form

Section A – Your details

Surname	Forename(s)	Title: Mr/Mrs/Miss/Ms/if other please state:
Address and Postcode		
Your email address:		
Daytime contact phone number		
Mobile Number:		

Please state by which of the above methods you would prefer us to contact you:

Your requirements:

If our usual way of dealing with complaints makes it difficult for you to use our service, for example if English or Welsh is not your first language or you need to engage with us in a particular way, please tell us so that we can discuss how we might help you.

The person who experienced the problem should normally fill in this form. If you are filling this in on behalf of someone else, please fill in section B.

Section B: Making a complaint on behalf of someone else:

Their Name in full	
Address and Postcode	
What is your relationship to them?	
Why are you making a complaint on their behalf?	

Section C About your concern / complaint

Name of the department / service you are complaining about:	
What do you think they did wrong or failed to do?	
Describe how you have been affected	
When did you first become aware of the problem?	
Have you already put your concern to the frontline staff responsible for delivering the service? If so, please give brief details of how and when you did so	
If it is more than 6 months since you became first aware of the problem, please give the reason why you have not complained before now.	

If you have any documents to support your concern/complaint, please attach them with this form.

Submit: