

Complaints & Feedback Form

Instructions:				
Complete this form and	forward it to either of the address given below:			
Email: customerlia: NDIS Contact : 1800 80		97 SUCCESS WA		
The Aastha community	services staff will contact you upon receipt of this form.			
	Anonymous Complaints and Feedback using this form, if you chool not be able to update you with progress or the result of the resolu			
Fill in the details of the person who is making the complaint/ providing feedback.				
Name:				
Address:				
Phone:				
Email:				
My preferred contact method	d:			
Relationship with the NDIS participant:				
Who is the person, providing feedback	or what is the service, about whom you are coabout?	omplaining or		
Name of Participant:				
Name of Service:				
Does the person know you are making this complaint/providing feedback? ☐ YES ☐ NO				

hat is your Complaint/Feedback about? ould you please provide some details to help us understand your concerns? ou should include what happened, where it happened, the time it happened and who was volved.
upporting Information /ould you please attach copies of any documentation at may help us to investigate your complaint/feedback or example letters, references, emails)?

What outcomes are you seeking because of the complaint/feedback?			

OFFICE USE ONLY

Date received	
Action taken or required	
Date action completed	
Signature	