

Complaint Form

DATE LODGED: _____



Do you want this complaint to be confidential?

Yes ☐

No ☐

Personal details

Name:	
Contact phone number/s:	
Address:	
Email:	

Please indicate your preferred method of communication?

Email ☐ Letter ☐

Is your complaint related to a breach of the Code of Conduct?

Yes ☐ No ☐

If yes, please indicate area of concern;

Not accepting and observing Goolawah's rules, policies, by-laws, community decisions and legislation.	
Behaving in a manner that endangers the health and safety of themselves or others.	
Not behaving with courtesy and consideration for others. Violence, bullying, verbal intimidation, harassment and offensive behavior will not be tolerated.	
Not respecting property of the community, members and visitors.	
Not respecting the environment including land, fauna and flora.	

Please state your concerns

Please provide details of your main concerns, including what events led to making the complaint, approximate dates and who was involved.

Have you discussed your concerns with the other party?

Yes ☐ No ☐

If **yes**, what was the outcome? If **no**, why not?

What outcomes would you like as a result of providing your complaint?

For information on **privacy** refer to the Goolawah Cooperative **Privacy Policy January 2017**

Signature: _____ **Date:** _____

Thank you for taking the time to lodge your complaint.
Please let the Cooperative know what we do well and where we can improve.