

Anonymous Complaints & Feedback Form

Instructions:

- 1. Complete this form.
- 2. Forward with information to our director via email, website, or post

Website	www.mccare.au
Email	director@mccare.au
Postal Address	5 Dewitt Street Salisbury Downs SA 5108

3. Please do not put your name through our website or on the envelope.

Who is the person, or what is the service, about whom you are complaining or providing feedback about			
Name or Service			
Does the person know you are making this complaint/providing feedback?	□ Yes	□ No	
What is your Complaint/Feedback about?			
Would you please provide some details to help us u You should include what happened, where it happen			
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Supporting Information Would you please attach copies of any documentation			

Would you please attach copies of any documentation that may help us to investigate your complaint/feedback (for example letters, references, emails)?

P: (08) 7371 0483/ M: 0452129757 admin@mccare.au www.mccare.au

MY COMMUNITY CARE

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

OFFICE USE ONLY

Date received	
Action taken or required	
Date action completed	
Signature	