

LEISURE DIRECT

Charity No 1050948

COMMENTS / COMPLIMENTS / COMPLAINTS / APPEALS

Part 1 – to be completed by the Complainant/Appellant

Date of Occurrence

This is a:

Comment

Compliment

Complaint

Appeal

Name:

Address
for reply:

Tel No:

Details of the comment/compliment/complaint (written submissions should be attached – if appropriate a brief summary should be set out below)

Date Made:

What action would you like to see happen?

Please attach any correspondence/notes and pass this form to the Leisure Direct Organiser with a copy to the Chair as soon as possible.

Part 2 - to be completed by the Leisure Direct Organiser

Acknowledged receipt: (within 10 days) Action Taken:	Date:
Resolved: (within 1 calendar month)	Date:
Chair notified:	Date:

Part 3 (Chair's Comments)

Review:

Did Leisure Direct make a mistake or omission?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Detail the corrective and preventative action that has been taken:			
Has complainant/appellant been notified of next stage of procedure?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Done <input type="checkbox"/>
Should this issue be raised with other services?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Done <input type="checkbox"/>
What training, if any, is required?			

Completed date:

Signed completed:

Leisure Direct Organiser

Signed completed:

Chair