

## Complaints Form

Section One  
(to be completed by participant)

Participant's name

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Address

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Phone

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Nature of complaint

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..... Signature of Participant

Attached additional information if required

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Section Two  
(To be completed by Look Now Training Representative if outcome is reached)

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..... Signature of Look Now Training Representative

..... Position

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Section Three  
(to be completed by representative of arbitrating body if complaint is taken to this level)

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..... Signature of Arbitrating Body Representative



..... Position
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Related Standards:6