

# Glenaeon OOSH Services Communication Form

## Feedback / Grievance Policy

This form should be completed in accordance with the service's Grievance & Complaints Policy. All matters are to be kept confidential at all times in accordance with the Confidentiality Policy.

Name of Person/s with Suggestion / Grievance \_\_\_\_\_

Staff / Parent Issue: \_\_\_\_\_

Date: \_\_\_\_\_

Nature of Suggestion / Grievance: \_\_\_\_\_

Details: \_\_\_\_\_

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Action Taken / Date: \_\_\_\_\_

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Outcome / Resolution: \_\_\_\_\_

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Parent / Stakeholders Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Director Signature: \_\_\_\_\_

Date: \_\_\_\_\_