Social Planning Toronto

External Complaints Policy Form

		Date:
Туре	of Complaint	
	Individual	
	Organization Group, Coalition, or Other:	
Detai	ls of complaint (include dates & tin	ne of occurrence, attach notes if more space required)
Signature of person initiating the complaint		Signature of Staff receiving complaint
Investigation Notes (attach notes if more space is required)		
Outcomes and Recommendations		
Signat	ture of Executive Director	Date