

COMPLAINT / APPEAL FEEDBACK FORM

We need your feedback to assist Black Diamond Training to continue to improve the effectiveness of our processes including the complaint and appeals processes.

Please assist us by completing this Complaint / Appeal Feedback Form.

Please relate your thoughts and experiences through the statements below; please attempt to focus on the process and not on the issue.

The resolution of the issue will be through a separate system; this process is to help future participants successfully lodge complaint and appeals.

Name (optional):

Date:

Please indicate your opinion of the following statements by circling one (1) corresponding number:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I knew of the complaint and appeals process prior to making a complaint or an appeal.	1	2	3	4	5
I found information on how to make a complaint or an appeal easily.	1	2	3	4	5
I was provided with assistance in the complaint and appeal process freely and easily by staff.	1	2	3	4	5
My complaint or appeal was received objectively and without judgement.	1	2	3	4	5
The complaint and appeals process was followed as documented in the policy.	1	2	3	4	5
I was provided with an opportunity to present my case.	1	2	3	4	5
I had access, if I required, to an independent arbiter.	1	2	3	4	5
I was clearly informed as to the outcomes of my appeal or complaint, in writing.	1	2	3	4	5
The complaint or appeal was resolved within a realistic and fair timeframe.	1	2	3	4	5

Please use this space to make any additional comments:

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