



COMPLAINT FORM

Please refer to the LASA Complaints Management Policy or more information.

PERSONAL AND CONTACT INFORMATION

Name of complainant: (if anonymous, please indicate)

Job Title:

Organisation

Contact phone:

Email address:

Consent for LASA officer to contact you? Yes No

(Note: If your complaint is anonymous, or if you do not consent to a LASA officer contacting you, LASA may be unable to validate or progress your complaint and the complaint may not be able to be fully investigated).

COMPLAINT INFORMATION

Provide a short summary of your complaint. Please include as much information as you can, covering what happened, when it happened and who was involved. If you need more space, please attach additional pages when you submit this form. Please also attach any relevant documents.

Describe the main issues you are concerned about.

LODGEMENT OF COMPLAINT

Please return this completed form to:

Chief Executive Officer (marked private and confidential)
Leading Age Services Australia Ltd
First Floor, Andrew Arcade
42 Giles Street
KINGSTON ACT 2604
Email: complaints@lasa.asn.au

If the complaint is about the CEO, the complaint should be made to the LASA Chairman via email to chairman@lasa.asn.au

Thank you for your feedback. LASA is committed to continuous improvement and is appreciative of the time you have taken to complete and lodge this form. You will receive an acknowledgement within 5 working days and a formal response to your complaint within 30 days. More complex matters may require more time to investigate and in such cases, LASA will communicate its expectations of timeframe with you directly.

Privacy Statement: LASA will not disclose any information provided by you other than in carrying out its functions to resolve this complaint. Please refer to the Privacy Policy on the LASA website for more information. www.lasa.asn.au