#### NDIS C



## What to do with this form?

When you have completed this form, you can

- Give it to the staff member looking after you
- Post it to us at: Accessible Diversity Services Initiative Limited PO Box 788 Auburn NSW 1835

# Do you have a Compliment, Suggestion, or complaint?

#### **Need an interpreter?**

If you need an interpreter when providing feedback, ask to speak with a worker or a Manager

Today's date:

Service:

#### Happy with your care?

Tell us what we did well:



### Unhappy with your care?

Tell us about your main concern:



#### Any suggestions?

Do you have any suggestions for improving what we do?

How would like this to be Resolved



#### Your Name (optional):

#### Phone (optional):

Please call me so I can give you more information

] I would like a response to my feedback