Complaint Form

My Name:	Unit #	Phone #
********	*********	***********
My complaint is about (If about another member, we need to know	ow who it is)	
Please quote the section of to (Check your Member Handbook for this)	the Policy or By-Law that you fe	el is being breached:
Explain what you have done	e to solve this problem yourself.	

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(1)					
(2)					
(3)					

List three possible solutions to this problem:

When you have completed BOTH sides of this form, hand it in to the co-op office or a Board member. It will be discussed at the next meeting of the Board of Directors and you will receive a written response.

If you need assistance filling out the form, the co-ordinator would be happy to help.

If the complaint is about the co-ordinator, refer to the Staff Complaint Procedure available in the office or in your Member Handbook. Complaints about staff can also by addressed by contacting the Staff Liaison person (check your phone list).

The Board takes all written complaints seriously, however... we only have the power to act on breaches of policies or by-laws.

Thank-you for bringing your concerns to our attention.