

If you are happy to provide your details please complete the below:	
Your Name:	
Your Address:	
Your Home Telephone Number:	Your Work Telephone Number:
Your Mobile Number:	Your Email Address:
Section 2: What action have you already taken in relation to this feedback?	
Have you previously discussed your concerns/feedback with selectability or another agency or person for assistance with these concerns?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, with whom and what was the outcome?	
Section 3: Privacy	
<p>selectability is committed to protecting your privacy. We collect and handle personal information that you provide on this feedback form for the purpose of investigating and responding.</p> <p>selectability will only use your information in accordance with relevant privacy and other laws. In order for us to provide services to you effectively and efficiently, we may need to share your personal information with others that deals with the matters identified in your feedback.</p> <p>If you choose to remain anonymous, selectability may be unable to deliver the full range of services you require.</p> <p>If you wish to contact selectability who is responsible for managing the personal information that you provide on this form, please call (07) 4724 6800.</p> <p>All feedback received is registered. The Improvements Register will keep a record of the feedback and the actions taken to resolve the issue as well as any actions required to be implemented.</p>	
<i>Selectability Quality Office Use Only</i>	
Date Received: _____	Received By: _____
Date Registered: _____	Complaint Number: _____

Thank you for taking the time to provide this feedback.

Please return your completed form to:

Email: feedback@selectability.com.au

Hand-deliver: Quality Officer 66-68 Charles Street, Aitkenvale, Townsville

For external advice/assistance contact: Independent Advocacy
 Townsville Free Call: 1800 887 688
 Email: reception@iat.org.au