Please note, if you do not wish to provide your name or other details, SAHARA SERVICES will investigate your complaint to the best of its ability with the information provided.

**Person making the complaint** (complainant) **SAHARA SERVICES Participant** (where applicable)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First name |  |  | First name |  |
| Family name |  |  | Family name |  |

**Relationship to Participant** (e.g., self/family/advocate/ carer/service provider)

**Preferred method of contact** (you can indicate more than one)

|  |  |  |  |
| --- | --- | --- | --- |
| **Home phone** |  | **Postal address** |  |
| **Work phone** |  |
| **Mobile phone** |  | **Email address** |  |

**Do you have any special communication needs (e.g., interpreter**)? Please provide details:

**What is your complaint about?**

If your complaint is about a service or a staff member, please provide us with identifying details.

**What actions would you suggest need to be taken?**

Please return the complaint/feedback form to:

[feedbackandcomplaint@saharaservices.com.au](mailto:feedbackandcomplaint@saharaservices.com.au) , or you can call on [[(02) 8406 0842](tel:8406%20%E2%80%93%200842)](tel:1800-4-724272).