

EXTERNAL COMPLAINTS FORM

INTERNAL REFERENCE NUMBER:	
1. COMPLAINANT (TO BE FILLED IN BY COMPLAINANT)	
Name	
Contact details (email and or phone number)	
2. COMPLAINT (TO BE FILLED IN BY COMPLAINANT)	
Type of complaint/ feedback	Harassment <input type="checkbox"/> Corruption/ Fraud <input type="checkbox"/> Other <input type="checkbox"/>
<p><i>Note: If you would prefer not to provide a written statement but would be willing to provide information over the telephone, please tick the following box and indicate your preferred language of communication. The Accountability Officer will arrange for a confidential telephone call.</i></p> <p>Please arrange for a confidential telephone call: <input type="checkbox"/> Preferred language of communication:</p>	
<p>Did this happen to you, if not what relationship do you have to the community or individual concerned?</p> <p>Details of the person this happened to: Age: Child (under 18 years old) <input type="checkbox"/> Adult (18 years old and above) <input type="checkbox"/> Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/></p>	
<p>Where did this happen? <i>Please provide the location (country, region, nearest community, or other distinguishing reference point)</i></p>	
<p>What happened? <i>(Please provide a thorough description of the issue so that we can investigate it further)</i></p>	
<p>When did this happen? If you don't know the exact date, please provide an approximate one (e.g., the beginning of January 2021)</p>	
<p>Has this incident already been raised with the local TRAFFIC office?</p>	
<p>Communication – has local law enforcement, local government official, or any other person (please specify) been informed?</p>	
<p>What are you looking for as an outcome to your complaint?</p>	

Are there any other issues related to the complaint and not referred to above that you would like to include?

Any other information? If you have any other information that could be useful, please add as an attachment e.g., photos, testimonies. Encrypted or password protected files cannot be uploaded because of antivirus protection.

Do not include sensitive personal information about any individual mentioned in your report if it is not necessary for describing your concern.

3. SIGNATURE (TO BE SIGNED BY COMPLAINANT)

By signing and submitting this complaint, I accept the procedure by which the complaint will be processed and note that, if dissatisfied with the initial results, I may choose to appeal at which time I will be informed of the follow-up process.

Date:	Complainant Signature:
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