COMPLAINT FORM

Contact Information Please type or print clearly.

Please circle one: Mr. Mrs. Ms. Dr.

First Name: _________________________ Surname: __________________________

Organisation (if applicable):
________________________________________

Mailing Address: ________________________________________________________

Email Address: _________________________________________________________

Telephone Numbers: ____________________(Home)
________________________(Mobile)
________________________(Work) ________________________(Fax)

Nature of Complaint Please type or print clearly.

Date Incident Occurred: ______________ Place Incident Occurred: __________________

Name of Person(s) Involved (if known):
________________________________________

Details of Complaint:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
The information stated above is an accurate account of the complaint to the best of my knowledge. However, it may be necessary for CNCF to contact me in order to obtain more information on the complaint, and I will assist as necessary. I understand that this complaint will be treated confidentially. I also understand that by making a complaint, a decision may not necessarily be reversed, nor can CNCF guarantee that a policy will be changed. I understand that the CNCF Managing Director will address my complaint in writing within 10 working days from the date the complaint was received.
**CNCF OFFICE USE ONLY:**

<table>
<thead>
<tr>
<th>Date Complaint Received: ______________________</th>
</tr>
</thead>
</table>

**How was Complaint Made? (check one)**

- [x] In person
- [ ] By telephone
- [ ] In writing

**Additional Information / Observation(s) from Staff Member Receiving Complaint:**

- __________________________________________________________
- __________________________________________________________
- __________________________________________________________
- __________________________________________________________

<table>
<thead>
<tr>
<th>Name of Staff Member Receiving Complaint</th>
<th>Signature of Staff Member Receiving Complaint</th>
</tr>
</thead>
</table>

**Date Complaint Investigation Began:**

__________________________________________

**Date(s) Contacted Complainant for More Information:**

__________________________________________

**Date Written Correspondence Sent to Complainant from Managing Director:**

__________
CAYMAN NATIONAL CULTURAL FOUNDATION (CNCF)
COMPLAINTS PROCEDURE

1. POLICY: CNCF recognises the right of the public to complain and is committed to using information gained from complaints to improve services and to better meet the needs of the public. Once a CNCF employee recognizes that a member of the public is not satisfied, they will inform him or her of the complaints procedure.

2. WHO CAN COMPLAIN: Any person or organisation receiving or seeking to receive a service from CNCF may make a complaint.

3. HOW COMPLAINTS CAN BE MADE: A member of the public may make a complaint in any of the following ways—
   • In person
   • In writing (submitted by hand, by e-mail, by fax or by post)
   • By telephone
Persons making complaints are encouraged to complete the CNCF Complaints Form and return it to the CNCF office. If it is not possible for the complainant to complete the CNCF Complaints Form, then a CNCF staff member will write the complainant’s details on the form. There is also a section for the staff member to note any observations about the complaint and complainant on the form. The complainant may request a photocopy of the completed form.

4. WHO WILL HANDLE THE COMPLAINT: The claim will initially be dealt with through the CNCF Managing Director. However, all staff will be trained in the receipt of complaints and will be available to receive a complaint. Their immediate response will be to channel a complaint to the most relevant (or available) Director or Manager.

5. HOW THE COMPLAINT WILL BE HANDLED: CNCF aims to handle every complaint promptly and fairly, with the following minimum standards:
   • The complaint will be recorded and stamped with the date by the receiving employee and submitted without delay to the Managing Director or, in his/her absence, the person acting on his/her behalf.
   • The Managing Director will acknowledge the complaint within three (3) working days and keep the complainant informed as to how the complaint is being dealt with. Where the complaint cannot be resolved immediately, the complainant will be provided with an interim response informing them of current progress.
   • Within ten (10) working days of receipt of the complaint, the Managing Director will respond in writing to the complainant. The written response will include remedies and/or apologies where appropriate.
   • If dissatisfied with the response from the Managing Director, the complainant has the right to request that the matter be reported to the Executive Committee of the CNCF Board. They will also be advised that they may report their complaint to the Office of the Complaints Commissioner.
   • On the resolution of the complaint(s), all complaint documentation will be
retained on the CNCF Complaints file for seven (7) years.
• All complaints received, along with their outcomes, will be treated in strict confidentiality and discussed only with necessary personnel in an effort to improve service.

Effective 1 April 2008