**WOMENS PIONEER HOUSING**

**COMPLAINT FORM STAGE 2**

**FORMAL COMPLAINT**

If a request is made to escalate to Stage 2, a Director will review the Stage 1 response along with the completed Stage 2 form and issue a final decision. This will complete our internal processes.

|  |  |
| --- | --- |
| **Complainant’s name** |  |
| **Address** |  |
| **Telephone numbers**  |  |
| **Email address** |  |

|  |
| --- |
| **Why do you want to escalate to Stage 2 and what do you want to be considered, including the elements of the stage 1 response you were not satisfied with?** |
|  |
| **What would you like us to do to put things right?** |
|  |

|  |  |
| --- | --- |
| **Signed**  |  |
| **Date** |  |

Office use

Complaint (stage 2) received by (staff member):

Name …………………………………………….. Date …………………

Date scanned to Invu: …………………………….

Date copy sent to complainant: …………………