

**Want the form in an alternative format?**

**Please contact:** [**residences@cardiff.ac.uk**](mailto:residences@cardiff.ac.uk)[**Tel: 029**](Tel:029) **2087 4849**

**Complaint reasons and timescales**

* You can use this Procedure to complain about the quality of facilities or services provided by Campus Services
* If a complaint is **not** received within the time limits attached to **each stage of the Procedure**, the complaint will normally be deemed as ‘out of time’. The time limits may be waived if good reason can be shown by you which prevented you from bringing the complaint forward within these limits e.g. hospitalisation

**How to submit** your complaint:

Ensure you complete the relevant form and submit it with evidence.

**Early Resolution Stage**: submit to the relevant area of Campus Services you are complaining about. Details can be found here:

http://www.cardiff.ac.uk/public-information/policies-and-procedures/campus-services-complaints-procedure

**Formal Stage**: submit by email to: [JonesV18@cardiff.ac.uk](mailto:FowlerLM@cardiff.ac.uk)

**Before** you submit a complaint:

*You* ***should****:*

* Read the **Customer Services complaints procedure web page**

*You* ***must****:*

* **Complete this form fully**, providing all of the information and evidence you want to be considered; if you are awaiting evidence, state what it is and when you can send it
* **Keep a copy** of your complaint and evidence

**CUSTOMER COMPLAINT FORM**

For Campus Services non-student customers

**CUSTOMER COMPLAINT FORM**

For Campus Services non-student customers

# *COMPLETE IN BLOCK CAPITALS OR TYPE*

|  |  |  |  |
| --- | --- | --- | --- |
| **1. PERSONAL DETAILS** | | | |
| **Full Name**: |  | | |
| **Email Address:** |  | | |
| **Address for correspondence in connection with the complaint:** | | | |
|  | | | |
|  | | | |
|  | | | |
| **Postcode:** |  | **Telephone:** |  |
| **PLEASE NOTE:** | **The University will communicate with you about your complaint by email** | | |

|  |
| --- |
| **If you have a disability and you require a reasonable adjustment to our complaint process, please provide details below:** |

|  |  |
| --- | --- |
| **2. COMPLAINT STAGE** | |
| Please indicate below which stage you are submitting your complaint under | |
| **Early Resolution** | **YES**  **NO** |

**OR**

|  |  |
| --- | --- |
| **Formal Stage**  You are normally expected to complete the Early Resolution Stage before submitting a Formal Stage Complaint unless you consider your complaint to be of a serious nature. Please refer to: http://www.cardiff.ac.uk/public-information/policies-and-procedures/campus-facilities-complaints-procedure  If on submission of your complaint, we think your complaint should be managed under the Early Resolution Stage, we will let you know. | **YES**  **NO** |

|  |  |
| --- | --- |
| **3. COMPLAINT DETAILS:**  (*Use additional sheets, if necessary*) | |
| **Please note that if the reason for your complaint is not clear this form will be returned to you with a request for clarification which must be answered within 7 calendar days.** | |
| 3.1 | Provide details of your concern, including dates of actions.  Please:   1. Attach any correspondence that you have had concerning your complaint and all other relevant documentation/evidence 2. Attach any decision you have received at the Early Resolution Stage of the Procedure (if applicable) |
| 3.2 | Please explain the actions you have taken to resolve your complaint, including who you have approached and when. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 3.3 | Please explain why you are not satisfied with the response you have received (if applicable). | | | |
| 3.4 | Please indicate what outcome or further action you are seeking. | | | |
| 3.5 | Please list below the relevant documents you are enclosing which must include all correspondence and evidence provided and received under the Early Resolution Stage (if applicable) as well as any further evidence you may wish to be taken into consideration. | | | |
| **Date of Evidence** | | **Document Type (e.g. Medical Certificate, Counsellors Letter, Police Report, Death Certificate, etc.)** | **Period Covered by Evidence** | **Is the Evidence Attached?**  **(if not – say when it will be available)** |
|  | |  |  |  |
|  | |  |  |  |
|  | |  |  |  |
|  | |  |  |  |
|  | |  |  |  |

|  |
| --- |
| **4. DECLARATION** |
| I declare that the information given is to the best of my knowledge true, and that I would be willing to answer further questions relating to my complaint if necessary.  Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**In order to improve the quality of the facilities and services delivered at Cardiff University the information you provide will be held on a secure complaints database in accordance with the Data Protection Act 1998. The database will be restricted to only those staff involved in administering your complaint and any reports derived from it for the purpose of monitoring our services, will be fully anonymised.**