## **Complaints Form - GMC/GRM/001**

Data	
Date:	
(Date complaint is received)	
Personal Details:	
(Name, contact details, if	
necessary)	
Nature of Complaint:	
Detail of Complaint:	
Who dealt with the	
complaint?	
•	
How it was dealt with:	
Outcome:	
(Outline of what has	
happened as a result of the	
complaint)	
Follow up required:	