



<u>*Communications</u>	
Date (day, mon, year)	
Name (First & Last)	
Contact Details	Phone Number: _____ Email: _____
Please indicate the nature of this communication	<input type="checkbox"/> Enquiry <input type="checkbox"/> Complement <input type="checkbox"/> Suggestion <input type="checkbox"/> Complaint
Please indicate the Department your communication is referring to	<input type="checkbox"/> Administration <input type="checkbox"/> Health <input type="checkbox"/> Education <input type="checkbox"/> Public Works <input type="checkbox"/> Housing
Description	[Please provide a brief overview]
Resolution or outcome	

<p>sought, if applicable</p>	
<p>Factual Summary and Chronology for Complaint or Enquiry, if applicable</p>	<p>[Please provide a chronological account of what took place or what your concern is. Make sure to include all relevant particulars such as where, when, how, who, and what.]</p>
<p>Documents attached</p>	<p>[include any relevant documents or communications and indicate how many documents are attached]</p>

*Gitsegukla Band Council employees might assist you in completing this form, however, such assistance does not constitute endorsement or support for your complaint or grievance, nor does it mean that Gitsegukla Band Council agrees with the content of your complaint or grievance. In the case of enquiries, Gitsegukla Band Council employees cannot provide responses or bind the Band Council. They may provide you with general information and guidance only. Further, Gitsegukla Band Council employees may respond to questions about the grievance/complaint process, but they cannot provide you with advice in connection with your complaint or grievance and any assistance offered is strictly limited to ensuring that you have properly completed this form.

Date submitted: _____

Signed: _____

Print name: _____

After completing, please submit to Reception at the Band Office

<p>For Office Use Only</p> <p>Date Received: _____</p> <p>Receiver Name: _____</p> <p>Forwarded to: _____</p>
