

Easy Read Complaints Form



You can ask someone to help you fill in this form. If someone helped you complete this form please write their name here:

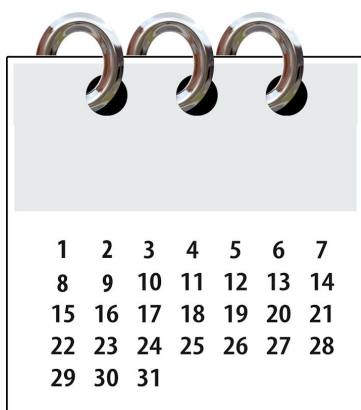


Your name:



Telephone number that I want to be contacted on:

Easy Read Complaints Form



The date I gave my feedback:

I was.....

Hit

Shouted at

Something Else



Please Tick  one or more boxes

Easy Read Complaints Form



Please write what happened here:

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This made me feel:

Angry

Sad

Something Else

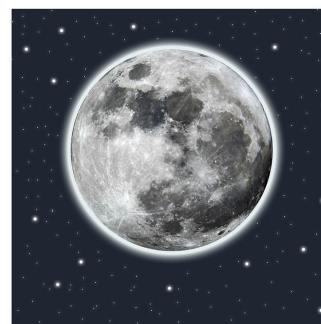
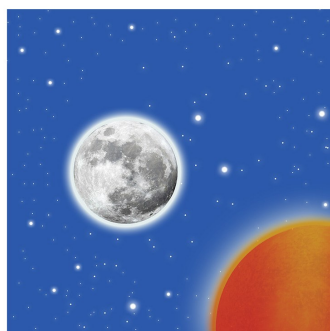
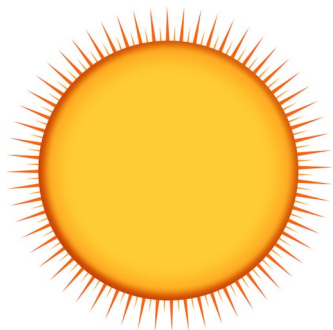


When did this happen?

Morning

Evening

Night

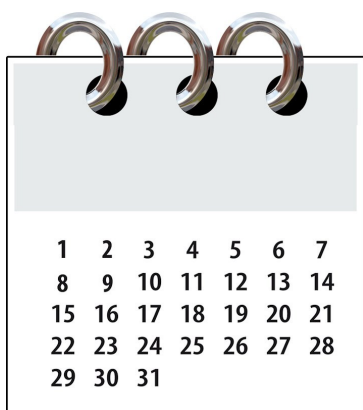


Please Tick



one or more boxes

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Date that it happened:



Please return this form back to

Complaints

HF Mencap

65 Aspenlea Rd,

Hammersmith, London W6 8LH



Or hand it in at any of our services
or projects.



Or email it to info@hfmencap.org