

Early childhood education and care complaint form

Please fill in as many details as possible to enable the department to effectively investigate your complaint.

Your details

Name

Phone number

Email address *

** So the department can contact you if more information is needed and to advise you of the outcome of your complaint.*

Your relationship with the service

Do you wish to remain anonymous to the service? **

***Please note if you do not consent to sharing your name or details of the complaint with the other person involved, we may be unable to investigate. Contact your [local departmental regional office](#) for more information.*

The local departmental regional office

****If you are unsure of your nearest regional office, we will forward your complaint if necessary to the relevant office.*

Early childhood education and care service details

Service type

Name of service

Address of service

Was the issue raised directly with the service or approved provider? If so when, with whom and what was the outcome?



Complaint details

Please provide as much information as possible including specific concerns, time and date of incident/s, what happened, names of child/ren and room/age group and names of other relevant persons. Please attach any supporting documentation such as emails and photos.

Desired outcome

Email this completed form and any attachments to the [local departmental regional office](#).

Next steps: [Read about what happens](#) after you have submitted your complaint.

