



Punjabi Community Health Services

Appendix 'C' - Request Form for Complaining to Next Level

Client Name: _____ Date: _____
(YYYY/MM/DD)

I am not satisfied with the response of my complaint, I want to appeal to the next level (please mark as appropriate):

- Immediate Supervisor
- Chief Operating Officer (COO)
- Chief Executive Officer (CEO)
- Board President

There is no higher level after Board President. If you are still unsatisfied you are free to seek independent advice at your own cost. (Outside PCHS)

Remarks (if any):

Thank you.

You will receive response of your complaint within 30 working days.