

# Complaint Form

My Name: \_\_\_\_\_ Unit # \_\_\_\_\_ Phone # \_\_\_\_\_

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My complaint is about...

(If about another member, we need to know who it is)

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Please quote the section of the Policy or By-Law that you feel is being breached:

(Check the co-op website for this – [www.mimicoco-op.ca](http://www.mimicoco-op.ca) , password: c00pL1ving!)

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Explain what you have done to solve this problem yourself.

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**Please complete BOTH sides of this form**

List three possible solutions to this problem:

(1)

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(2)

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(3)

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When you have completed BOTH sides of this form, hand it in to the co-op office. It will be discussed at the next meeting of the Board of Directors and you will receive a written response.

If you need assistance filling out the form, the office staff would be happy to help.

If the complaint is about the staff, refer to the By-law or by contacting the Staff Liaison person (Shirley Whittaker).

**The Board takes all written complaints seriously, however... we only have the power to act on breaches of policies or by-laws.**

Thank-you for bringing your concerns to our attention.