

NAZ IMMIGRATION LTD
CLIENT COMPLAINT FORM



DATE: _____

CLIENT NAME _____

FILE REFERENCE NUMBER _____

AREA OF LAW _____

PURPOSE OF COMPLAINT (please circle):

Conduct	Failure to investigate conduct	Delay
Cost Information Deficient	Discrimination	Failure to keep client informed
Cost Excessive	Failure to Advise	Failure to keep papers safe
Criminal Activity	Failure to comply with Agreed Remedy	Failure to progress
Data Protection	Failure to Follow Instructions	Other (please specify)

COPY OF COMPLAINTS HANDLING POLICY PROVIDED? (please circle):

Yes No

OUTCOME (please circle):

Resolved internally Offer Rejected Complaint not upheld

REFERRED TO OISC (please circle):

Yes No

OUTCOME AT OISC (please circle):

Complaint not upheld Conciliated Formal OISC decision

OISC CASE FEE (please circle):

Free Payable Waived

OISC DECISION ACCEPTED (please circle):

Yes No

IF YES, DATE FOR COMPLIANCE _____

NOTES:
