



Feedback and Complaints Form

Please complete this form and return to info@achievepartners.co.uk

Name of individual providing feedback

Date

Type of customer	Employer	
	Training provider	
	Learner	

Customer name

Telephone number

Email address

Type of feedback	Feedback	
	Complaint	

Feedback/Complaint details

Please provide as much detail as possible about your feedback/complaint including dates and names of individuals involved. Please reference any supporting documentation you are submitting as evidence.

Actions (for complaints only)

What actions could Achieve+Partners do you feel might resolve the problem at this stage?

Please use additional sheets if required