

Queen Victoria Childcare Centre Accessibility Feedback Form

Name:	Date:
Contact Information:	

Client Response Form

Thank you for taking the time to contact us, regarding your concerns. Please feel free to contact us at any time if you require any additional information regarding this issue.

Was our customer service provided to you in an accessible manner? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Somewhat
Comments

Did you have any problems accessing our services? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Somewhat
Concern Raised:

Action Required:
Response and Follow-Up:

Date	Signature
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