##### Appendix 1 - Cwm Taf Morgannwg Safeguarding Board Complaint Form

|  |  |  |
| --- | --- | --- |
| **Name of person involved:** |  | |
| **Address:** |  | |
| **Date of meeting (if applicable):** |  | |
| **Chair of meeting (if applicable):** |  | |
|  |  | |
| **Name of person making the complaint:** |  | |
| **Relationship to the person above:** |  | |
| **Address:** |  | |
| **Telephone number:** |  | |
| **E-mail address:** |  | |
| **Please provide details of your complaint below (continue on a separate sheet if required):** | | |
|  | | |
| **Signed:** | | **Date:** |

Please return to:

Cwm Taf Morgannwg Safeguarding Board Business Manager

Business Unit

Ty Catrin, Unit 1, Maritime Industrial Estate

Maesycoed

Pontypridd, CF37 1NY