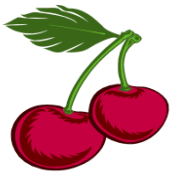


## Little Cherries Complaints Form

Date:
Name of complainant (PLEASE USE BLOCK CAPITALS)
Address (BLOCK CAPITALS)
Contact details: Telephone  Mobile phone  e-mail
I wish to make a formal complaint against ..... I am aware of Little Cherries complaints procedure.  DETAILS OF YOUR COMPLAINT: (please be as specific as possible. Continue on another sheet if necessary)
Signed:
Received by : Signed:



## Little Cherries Complaints Summary Form

Date:

Complaint:

Summative points:

Agreed and signed by parent/carer:

Agreed and signed on behalf of Little Cherries: