

Hornsby Ku-ring-gai Women's Shelter - *Feedback Form*

Please return this form to:

*Private and Confidential
Attention: Chairperson
Hornsby Ku-ring-gai Women's
Shelter Board of Management
PO Box 641
Hornsby NSW 1630*

We value your feedback, good or bad, as you can let us know what we're doing well or show us areas where we can improve. If you have used our services, or are a volunteer or community member, we value your feedback.

Your Details

This section may be left blank if you would like to remain anonymous. If you wish to receive a reply to your feedback, please complete your name and contact details here.

First name: Last name:

Phone number: Email:

Details of Feedback

We value your thoughts and feedback. Please provide as much detail as possible, including names of staff if applicable. Please continue overleaf if necessary.

Would you like a response to your feedback? (please include contact information if desired)

Yes No

Additional space if required:

Staff Use Only

Feedback received by: Date feedback received:

Action taken or required:

Date action completed: Staff signature: