



TROPICS PLAN MANAGEMENT

CLIENT FEEDBACK AND COMPLAINTS FORM

Please note you can choose to complete this form anonymously; however, we will be unable to respond to your form. Please submit this form to admin@tropicspm.com.au

☐ I am completing this form anonymously. Please skip to section 2

I am completing this form because:

☐ I would like to make a complaint.

☐ I would like to provide feedback.

SECTION 1: Contact Details

Client Details	
Full Name	
NDIS Number	
Phone Number	
Email Address	
Address	

Representative Details (if applicable)	
Full name	
Organization or Relationship with Participant	
Phone Number	
Email Address	
Postal Address	

SECTION 2: DETAILS OF COMPLAINT OR FEEDBACK

Date of Event	
Who was involved?	
<p>Details about your concerns or feedback. Please include what happened, where it took place and who was involved. Please attach any supporting evidence.</p>	

What resolution or outcome would you like to happen?	
Please advise the best person to contact and the preferred method of contact regarding your feedback or complaint. Please circle your answers.	
Me (the client)	My representative
In person	In person
By phone	By phone
By Email	By Email
By Mail	By Mail

Alternatively, you can also contact the NDIS Commission regarding feedback and complaints.

Please see their contact details below:

Phone: 1800 035 544

Online: <https://www.ndiscommission.gov.au/participants/complaints>.

You may seek support from family, a friend or an independent advocate when making a complaint. For further information about disability advocacy please visit the NDIS Commission website.