**FM 016 - Appeal / Complaint Investigation Report Form**

**for the ARAC MLA Group**

1. **Details from ARAC Complaints / Appeals Register:**

| **COMPLAINT / APPEAL LOG NUMBER (Month/Year/#)** | **DATE COMPLAINT /APPEAL RECEIVED** | **DATE INVESTIGATION COMPLETED** |
| --- | --- | --- |
|  |  |  |

1. **Complaint/ Appeal investigated by: Complaints Working Group (CWG) / Appeals Working Group (AWG)**

Details of CWG / AWG:

|  |  |  |
| --- | --- | --- |
| **DATE CWG/AWG ESTABLISHED** | **MEMBERS OF CWG/AWG** | **DATE CWG/AWG DISBANDED** |
|  |  |  |

1. **Details of supporting documentation received, if any:**

|  |  |
| --- | --- |
| **DATE RECEIVED** | **NAME OF DOCUMENT AND DETAILS** |
|  |  |

1. **Details of the complaint /appeal:**

|  |  |
| --- | --- |
| **DATE****(YYYY-MM-DD)** | **DETAILS OF COMPLAINT/APPEALS / RECOMMENDATIONS / DECISIONS / ACTIONS / ILAC RESPONSE / RESOLUTIONS / COMMENTS DETAILS OF A RECONSIDERATION OF THE OUTCOME OF A COMPLAINT /APPEAL** |
|  | Complainant / Appellant: Name of Organization Representative: Complaint Category: 6.1 / 6.2 / 6.3 / 6.4Details of complaint / appeal: Action required: |

1. **Details of the reconsideration of the outcome of a complaint / appeal, if any:**

|  |  |
| --- | --- |
| **DATE****(YYYY-MM-DD)** | **DETAILS OF A RECONSIDERATION OF THE OUTCOME OF A COMPLAINT / APPEAL** |
|  |  |