

Complaint No. : _____

Reference No. : _____

CUSTOMER COMPLAINT FORM

DOCUMENT SUBMISSION

SPONSOR LETTER

OTHERS

A. Customer Information :

(i) **Name :**

(ii) **ID No :**

(iii) **Faculty / Dept :**

(iv) **Address :**

..... Phone No. :

Signature

Date :

Time :

.....

(v) **Message :**

.....

.....

.....

B. Complaint receiver :

..... **Date :**

Signature

For Office Use

C. Action :

D. Notes :

Signature : **Date :**