



AUTHORITY FOR RELEASE OF INFORMATION — COMPLAINT —

Your Information and The Privacy Act

The Community Support Frankston Incorporated (CSF) respect and acknowledge the privacy of individuals. The information we are seeking is for the purposes of providing services or to carry out our functions. Under the provisions of the Privacy Act the information being collected by CSF will be held securely and no information will be passed on to any other person or entity without your written consent. You have a right of access to, and alteration of, incorrect personal information concerning yourself in accordance with the Privacy Act.

Name: _____
(Please print)

Address: _____
(Please print)

(Client to sign) I _____ authorise
Community Support Frankston workers to discuss my current situation in respect of my complaint.

Date: _____

CSF respects the confidentiality of client information under the Privacy Act.

Community Support Frankston
COMPLAINT REGISTRATION

Name of Person Making Complaint:
Contact Address:
Contact Telephone Number:
Date:
Complaint details:
Name of CSF person receiving complaint:

CC: *Complainant* *Worker* *Assessor* *Complaint Registration File*