

# INTERNATIONAL SOCIETY FOR KRISHNA CONSCIOUSNESS



## COMPLAINTS FORM

### Information for Applicants:

- Complaints should only be lodged by a complainant in writing if you have been unable to resolve your issue or concern informally.
- You will receive acknowledgment of your lodged complaint within three (3) business days upon the International Society for Krishna Consciousness (**ISKCON**) having received your complaint/appeal.
- We may ask you for further information in relation to your complaint.
- ISKCON will endeavour to resolve your complaint within a reasonable timeframe: usually twenty eight (28) business days upon receipt of the written complaint and all further information in relation to it, or as soon as practicable. However, in some cases, particularly if the matter is complex, the resolution may take longer.
- Applicants may be asked to provide additional information to support their complaint.
- Please complete all fields on this form.
- Please submit this form to The President, Hare Krishna Melbourne, PO Box 125 Albert Park 3206 on (03) 9699-5122 or [melbourne@iskcon.net.au](mailto:melbourne@iskcon.net.au)

### PART A - APPLICANT DETAILS

#### Personal Details

|   |                               |                   |                                 |
|---|-------------------------------|-------------------|---------------------------------|
| Title_____                              | Name_____                     | First_____        | Surname_____                    |
| Gender                                  | <input type="checkbox"/> Male |                   | <input type="checkbox"/> Female |
| Date Birth_____                         | of                            | Phone (Home)_____ | Mobile Phone_____               |
| Home Address_____                       | Suburb_____                   |                   | Post Code_____                  |
| State_____                              |                               | Country_____      |                                 |
| Postal Address_____                     | Suburb_____                   |                   | Post Code_____                  |
| <i>(if different from Home Address)</i> |                               |                   |                                 |
| State_____                              |                               | Country_____      |                                 |

**PART B - COMPLAINT DETAILS**

Please provide details of the nature of your involvement with ISKCON:

Please provide details of your complaint:  
*(If necessary attach an extra page to outline the details. Any supporting documentation should also be provided (copies required only))*

Does your complaint involve behaviour by a particular staff member of ISKCON? If so please provide the name of the staff member involved and any information about the staff member's involvement:

Yes  No  
Name of staff member \_\_\_\_\_  
Nature of involvement:

Please provide details regarding how the complaint has affected you:

Please provide details in relation to how you became aware of the complaint:

Does your complaint require urgent attention?

Yes  No

|  |  |
|--|--|
| Have you lodged a complaint about this issue before?                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, when:  |  |
| Have you reported your complaint to any other agency?                              | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, to whom:   |  |
| What is your expected outcome?   |  |
| Please provide the contact number and time to contact you regarding the complaint: |  |