**KEELE UNVERSITY LEGAL ADVICE CLINIC**

**COMPLAINTS FORM**

You may use this form to make a suggestion or to make a complaint about Keele University Legal Advice Clinic.

We would like you to return this form as soon as possible to

legal-advice-clinic@keele.ac.uk

**Your Name** …………………………………………………………………………..

**Address** …………………………………………………………………………...

 …………………………………………………………………………..

**Telephone** …………………………………………………………………………..

**Date of incident**

**Approximate time of incident**

**Suggestion / Complaint**

**What action would you like to be taken?**

**What times are convenient for you to have an appointment to discuss this?**