Somerville Community Services
Reply Paid 42644
CASUARINA NT 0811

Delivery Address:
PO Box 42644
CASUARINA NT 0811

No stamp required
if posted in Australia

Width: 90 mm X Length: 145 mm

Note: All components must be printed.
The artwork components must not be re-scaled.
Re-scaling will create processing problems.

Somerville
the courage to be...

Your LOCAL Community Service

SERVICE FEEDBACK FORM

In completing this form you are assisting Somerville achieve continuous improvement in service excellence.

We would appreciate if you could take the time to provide your comments and suggestions and return via free post - thank you.

WOULD YOU LIKE TO RECEIVE A REPLY TO YOUR FEEDBACK?

- ❑ **NO**
- ❑ **YES** [Please complete details inside]

ANY OTHER COMMENTS/OBSERVATIONS?

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

VISION STATEMENT

People are able to gain improvement in their quality of life by achieving the highest attainable standard of social and economic outcomes.

VALUES

- Recognition of the intrinsic worth of every human being
- Generosity from the heart
- Service to the community
- Justice within our society

MISSION STATEMENT

To impact positively on the dignity and quality of life of people who are affected by social and economic disadvantage.

OFFICE USE ONLY

Date Received .....
Received by .....
Action taken by .....

YOUR CONTACT DETAILS (Optional - only if you wish to be contacted)

(Please circle) Mr Mrs Miss Ms Dr Rev

NAME .....

ADDRESS .....

PREFERRED CONTACT Phone ..... Email .....

PRIVACY STATEMENT

Somerville is committed to protecting your privacy. Information collected will be used for the sole purpose of improving our service delivery. Where required by law, or where otherwise consented, this information may be disclosed to a third party.

CATEGORY ❑ **FEEDBACK/SUGGESTION** ❑ **COMPLAINT** ❑ **COMPLIMENT** ❑ **OTHER**

YOUR FEEDBACK IS REGARDING (Tick all of which is applicable)

❑ **FAMILY SERVICES** ❑ **DISABILITY SERVICES** ❑ **ADMINISTRATION** ❑ **OTHER**

YOUR FEEDBACK IS RELATED TO (Tick all of which is applicable)

❑ **SERVICE DELIVERY** ❑ **SERVICE ACCESSIBILITY** ❑ **SERVICE AVAILABILITY** ❑ **OTHER**

YOUR COMMENTS .....

If you are not satisfied with the response provided by Somerville, we can provide information on alternative complaint mechanisms; brochures are available from reception.