

# **Australian Audiology Hearing Specialists**

# **Customer Complaint Form**

Thank you for contacting Australian Audiology Hearing Specialists. We take all complaints seriously and strive to resolve them efficiently and fairly.

Please complete all sections of this form to the best of your ability.

Section 1: Your Details				
	First Name:			
	Last Name:			
	Email Address:			
	Phone Number:			
	Preferred Contact Method (Email or Phone):			
Secti	on 2: Complaint Details			
2.1. 0	Complaint Regarding: (Please select one or more)			
	Customer Service Officer			
	Clinical Practitioner			
	Hearing Aid			
	Assistive Listening Device			
	Hearing Aid Accessory			
	Other (Please specify):			
2.2. [	Date of Service or Product Received:	(DD/MM/YYYY)		

### 2.3. Description of Complaint:

Please clearly describe the issue you experienced with the service you received or the product you purchased. Be sure to include specific details such as:

ot the issue, a	nd any actions taken at the time.	
	complaints: The specific product, the nature of the problem	 em
	complaints: The specific product, the nature of the probles impacted your experience.	em
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What would you like to see happen as a result of this complaint? (e.g., replacement product, refund, apology, additional service)				
2.5. B	Best Outcome:			
In you	ur opinion, what would be the best possible resolution to this complaint?			
Section	on 3: Additional Information			
	e use this space to provide any additional information that may be helpful in ving your complaint. You may also attach relevant documents (e.g., receipts, es)			
Section	on 4: Submission			
	You can submit this form by email to: <a href="mailto:info@australianaudiology.com.au">info@australianaudiology.com.au</a> Mailing address: PO BOX 3066, Loganholme QLD 4129 Alternatively, you can call us on: 0428285353			

2.4. Desired Outcome:

We aim to acknowledge your complaint within 3 business days and will work towards a resolution as quickly as possible. Thank you for your patience and cooperation.

#### **Additional Contact Details**

#### **Ethics Review Committee, Audiology Australia:**

#### **Ethics Officer**

PO Box 370, Monbulk

Victoria 3793

• **Phone:** (03) 9940 3911

• Email: ethics@auderc.org.au

• Website: https://auderc.org.au/make-a-complaint/

#### **Hearing Services Program:**

• Phone: 1800 500 726

• Email: hearing@health.gov.au

#### Office of Fair Trading Queensland:

• **Phone:** 137468

• Email: brisbane.oft@justice.qld.gov.au

#### **Fair Trading New South Wales:**

#### **NSW Fair Trading**

PO Box 972

Parramatta NSW 2124

• **Phone:** 137788

#### **Professional Bodies:**

# **Audiology Australia**

• Email: info@audiology.asn.au

• **Phone:** 03 9940 3900

# **Australian College of Audiology**

• Email: acaud@acaud.org

• **Phone:** 07 3839 1622