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PanSALB
PAN SOUTH AFRICAN LANGUAGE BOARD

COMPLAINT FORM

Please read this entire complaint form before filling in this form. Please write clearly, use capital letters, and your language of choice. If there is not enough space on this form for your response, please use a separate piece of paper and send it to us together with this form.

For office use only

Province:		City/Town:		Reference no.:	
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Sections 1 to 4 must be filled in by everyone completing this form

1. Your details

Name, surname, & age _____

Telephone numbers _____

E-mail _____

Address _____

Nationality/Citizen status (*Please specify*) _____

ID number _____

2. If you are lodging the complaint on behalf of another person or organisation, a. please provide their details

Name, surname, & age _____

Telephone numbers _____

E-mail _____

Address _____

Nationality/Citizen status (*Please specify for the purpose of statistics*) _____

b. please provide the details of the organisation

Name of organisation _____

Telephone number _____

Email _____

Address _____

Mandate of organisation _____

Name and contact details of another relevant person at organisation _____

c. State your complaint

Who is the complaint is against?

(Name & surname, if its natural person, or name, if its an organ of the state, juristic person, or organisation. Please also provide any contact details. If you don't know their name, please tell us anything you know about them.)

3. In your own words, tell us exactly what happened. Include all the information you think is important. (Please feel free to attach additional pages or content if there is not enough space below.)

4. Have you reported this case to anyone else?

 Yes

 No

If so, who?

(For example, police, lawyers, the Public Protector, the Human Rights Commission, the Commission on Gender Equality, the Commission on Restitution of Land Rights, the South African Heritage Resources Agency, any provincial heritage resources authority)

5. Consent: Can we use your name in news reports or letters we write for you ?

 Yes

 No

Once you have filled in this form, please post, fax, email or WhatsApp it to any of the PanSALB offices throughout the country. Please note the contact details attached in Annexure A.

Thank you for filling in this form. We will get back to you as soon as possible. If you have any queries, please call us and ask to speak to someone in the Linguistic Human Rights Unit.

FOR OFFICIAL USE

Complaint Number:

Date received:

Received by:

Acknowledgement

date:

Acknowledged

by:

For investigation / mediation / negotiation / conciliation: