

A programme of the **WILD**TRUST

Public Grievance Form

Reference No.: 03_07_19-23_WildTrust_Indian_Ocean

Please enter your contact information and grievance. This information will be dealt with confidentially.

Please note: If you wish to remain anonymous, please enter your comment/grievance in the box below without indicating any contact information – your comments will still be considered.

Full Name	
Anonymous submission	□ I want to remain anonymous
Please mark how you wish to be contacted (mail, telephone, e- mail).	By mail (please provide mailing address):
	By telephone (please provide telephone number):
inan).	□ By e-mail (please provide e-mail address):
Preferred	🗌 IsiZulu
language for communication	
	English
	Other, please specify:
Description of inc	cident or grievance:What happened? Where did it happen? How did it happen to?What is the result of the problem?
Date of	□ One-time incident/grievance (date)
incident/grievanc	e: Happened more than once (how many times?)
	On-going (currently experiencing problem)
What would you like to see happen to resolve the problem?	
	increase forms to Cimeron Dole, Will DOCEANC Dreiseste Director and Environmental and Casial

Please return grievance form to: Simone Dale, WILDOCEANS Projects Director and Environmental and Social Management System (ESMS) Manager, <u>simoned@wildtrust.co.za</u>

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