



WALGETT ABORIGINAL MEDICAL SERVICE LIMITED

ACN: 605 822 339 ABN: 78 014 990 451
37 Pitt Street (PO Box 396), Walgett NSW 2832
Tel: 02 6820-3777 Fax: 02 6828-1201
www.walgettams.com.au

T/A Brewarrina Aboriginal Medical Service
5-7 Sandon Street (PO Box 40), Brewarrina NSW 2839
Tel: 02 6839-3333 Fax: 02 6839-2477
www.walgettams.com.au

FEEDBACK FORM

Your feedback is important to us and will assist us with making improvements to our service delivery and processes.

PERSONAL INFORMATION

FULL NAME

STREET ADDRESS

POSTAL ADDRESS

EMAIL ADDRESS

CONTACT NUMBER:

You are completing this form as:

- ☐ Client
- ☐ Community Member
- ☐ WAMS Member
- ☐ Other

Your feedback is:

- ☐ General Feedback
- ☐ Complaint
- ☐ Compliment
- ☐ Suggestion

Does your feedback refer to a specific service?

- ☐ Administration or Finance
- ☐ Dental
- ☐ Goonimoo Childrens Service
- ☐ GP Clinic
- ☐ Wellness Centre
- ☐ Other

"For the Community, By the Community", since 1986
Health is Life is Health

FUNDED BY: FEDERAL DEPT OF SOCIAL SERVICES - NATIONAL INDIGENOUS AUSTRALIANS AGENCY
WESTERN PRIMARY HEALTH NETWORK - NSW HEALTH - RURAL DOCTORS NETWORK





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Please provide the details of your feedback.

What improvements could we make, based on your feedback.

Signature

Date.....

All complaints must be submitted in writing. Where reasonable, the preliminary assessment should be conducted within 20 working days of lodging the complaint, and a written statement of the outcome of the preliminary assessment will then be provided. If further investigation is required, this should be conducted within 30 days of the preliminary assessment, for conclusion of the investigation. If there are delays in the timeframes above, WAMS will advise all parties of the reasons for the delay.

Please submit your completed form to:

The Chief Executive Officer
Walgett Aboriginal Medical Service Ltd
37 Pitt Street, (PO Box 396)
Walgett NSW 2832

Email: ContactUs@walgettams.com.au

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