

MY COMPLAINT IS: - (Please try to lay out clearly what you are complaining about and why. If possible you should also indicate the redress you are seeking. Please identify the part(s) of the COSCA Statement of Ethics and Code of Practice which have been breached - copies available online or by request.)

Cont : -

(Continue on a separate sheet, if you wish)

Signed:

PRINT NAME:

Address:

.....

.....Postcode.....

Tel. No:

Email:

Date:

**Please return this form to :
Chairman, SBSS, Market House, 14 Market Street, Lerwick, ZE1 0JP
marked 'Private and Confidential'**