



Privacy Inquiry/Complaint Form

SECTION 1: Contact Information

1. Are you making this complaint on your own behalf? Yes No

If 'No', please make sure that you send us a written authorization from the person you are representing.

Contact Information

First name *	Last name *	Email address
Mailing address *		City *
Province *	Postal code *	Country (if outside Canada)
Daytime Telephone number *	Alternative Telephone number	
<i>Please enter the Daytime Telephone number as the best number to contact you from Monday to Friday, 8:30am to 4:30pm ET.</i>		

Valeyo is committed to ensuring that clients with disabilities have equal access to, and can benefit from, all of our support services. If you are requesting accommodation for a disability in our complaint investigation process, your request should be made in writing, unless you are unable to do so.

- When requesting accommodation for a disability in writing, please describe the nature of the accommodation requested and the rationale for the request in the text box below.
- If providing the information in writing would limit your ability to make such a request, please contact us at 1-800-763-1300 and we can assist you in making your request directly or refer you to the appropriate person.

Only use this space if you are requesting accommodation for a disability. Otherwise, please leave this space blank.

SECTION 2: Details of Complaint

Please provide information about your complaint below.

You should also describe any efforts you made to resolve the issue with the organization concerned.

2. Which organization do you represent, if applicable?

3. Are you submitting the complaint as a customer or as an employee of the organization?

Customer

Employee

4. **Summarize your complaint.** *(Please describe the events or circumstances that led to your complaint. Include details such as the names or positions of people involved in the incident, the locations where the incident occurred, and any other factors you consider relevant. If the organization gave you a reference number in relation to this issue, please include it as well.)*



5. Have you complained about this incident to another body or organization, including a regulator?

Yes No

If 'Yes', please provide details. *(Indicate the name of the body and include relevant details such as dates and a reference number.)*

6. How can Valeyo help address your concerns? *(Please describe any steps or remedies that would resolve your issue.)*

SECTION 3: Documentation

If you have documents relating to your inquiry or complaint, please attach them:

- Any correspondence relating to this matter.
- Authorization forms.
- Other relevant documentation.

Please list the file names of the attached documents.
1.
2.
3.
4.
5.
6.
7.

SECTION 4: Certification

By submitting this form, you certify that the information you provided on this form, to the best of your knowledge, is true and complete.

Name:

Date: