

**Complaint Form for the written procedure**

*If you would like to submit a complaint about the T.M.C. Asser Instituut in writing, please use this form, and send it to*

Stichting T.M.C. Asser Instituut
Complaints procedure secretariat
P.O. Box 30461
2500 GL The Hague

*The subsequent course of processing your complaint is described in our complaints procedure. Unsigned forms will not be reviewed.*

1. Basic data

|  |  |
| --- | --- |
| Name of your company or organization |  |
| Your name  |  |
| Address |  |
| Post code/place |  |
| Phone number |  |
| Email address |  |
| Name of person or title of activity the complaint concerns  |  |
| Date of activity |  |

*To ensure prompt and careful consideration of your complaint, please describe it as specifically as possible: what is the nature and scope of the problem, what and/or whom does it concern? How long ago did it start, and did it occur once or several times?*

1. Description of the complaint(s):

|  |
| --- |
|  |

*If relevant: if you already have an idea about a possible solution or would like a different type of response from us, please elaborate.*

1. Desired solution/response:

|  |
| --- |
|  |

1. Have you already been in touch with us by phone about the complaint? If you have, whom did you speak with, and what was the outcome?

|  |  |
| --- | --- |
| Date: |  |
| Phone contact with: |  |
| Outcome of this conversation: |  |

Date: ……/……/…………..

Signature: ………………………………………..