

*Please use this form to report any issues or concerns you may have. Your feedback is valuable to us, and we will address your complaint promptly.*

**Section 1: Complainant Information**

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| --- |
| **Full Name:**  |
| **Contact Number:** | **Email:**  |
| **Address:**  |
| **City:** | **Country:** |

**Section 2: Complaint Details**

|  |  |
| --- | --- |
| **Date of Incident:**  | **Time of Incident:**  |
| **Location of Incident:**  |
| **Description of the Complaint:**  |



**Section 3: Additional** **Information**

* **Witnesses**: Were there any witnesses to the incident? [ ] Yes [ ] No
	+ If yes, please provide their names and contact information:
* **Evidence/Documents:** Have you attached any evidence or documents related to the complaint? [ ] Yes [ ] No
	+ If yes, please list the attached documents:

**Section 4: Resolution Request**

**• Desired Resolution:** What outcome or resolution are you seeking as a result of filing this complaint?

**Section 5: Declaration**

I, the undersigned, declare that the information provided in this complaint form is true and accurate to the best of my knowledge.

**• Signature: Date:**

**Section 6: Submission**

Please submit this complaint form by email to:

• Universe Path Academy for Training and Consulting

• Arab and International Cooperation Department

• Email to: Complaints@universepath.com