# Sample form: Complaints against multiple organisations

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| **Consent for sharing my personal information with the other organisations I am complaining about**  I, [insert full name of service user affected], give my permission for [insert name of organisation that has received the complaint] to share any relevant personal information it holds about me with the other organisations and service providers that are involved in the service I have complained about (see details below).  I also give my permission for the organisations listed below to share any relevant personal information they hold about me for the purpose of investigating and responding to my complaint.  I understand that my rights under UK data protection law will not be affected.    **Statement of consent:**   * I understand that personal information is held about me. * I have had the opportunity to discuss the implications of sharing or not sharing information about me. * I agree that relevant personal information about me may be shared and gathered from and between the following organisations and agencies to help them investigate and respond to my complaint:   [List organisations involved in investigating and responding to the complaint]  Are there any organisations or agencies you do not want us to share your data with or gather information from? Please list them here:  [List organisations you do not want us to share your data with or gather information from]  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My details  |  |  | | --- | --- | | **Name** | Click or tap here to enter text. | | **Address** | Click or tap here to enter text. | | **Postcode** | Click or tap here to enter text. | | **Telephone numbers** | Click or tap here to enter text. | | **Email** | Click or tap here to enter text. | | **Date of birth** | Click or tap to enter a date. | | **Date** | Click or tap to enter a date. | | **Signature** | Click or tap here to enter text. |   If you have any questions about this form, please contact us at [provide tel no] or [provide email].  **Your consent to share personal information is entirely voluntary and you may withdraw your consent at any time.** If you have any questions about this process, or with to withdraw your consent, please contact: [insert name and contact details for key contact].  Please return this consent form as soon as possible so there is no delay in handling your complaint.  Please return to [organisation that has received the complaint to insert relevant address/email address and contact details]. |
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