



## C01 Notification of Complaint

Thank you for submitting your notification. Below is a copy of the information provided in your notification. If there are any issues, please contact your [Regulatory Authority](#) for assistance.

### Notification of Complaints

#### Provider

Provider Name	Goodstart Early Learning Ltd
Provider Number	PR-00001129
Provider Approval Status	Approved

#### Service

Service Legal Entity Name	
Service Trading Name	Goodstart Early Learning Isaacs
Service Approval Number	SE-00009783
Service Approval Status	Approved

### Complaint Details

Please select the relevant notification and provide/attach the information required	Complaints alleging that the Law has been contravened
Please supply the following information: - Complainant name and contact details	<b>P01 P01</b> - Case Officer (Details not provided) <b>P01P01</b> P: <b>P03</b>
Please supply the following information: - Name of child/children, gender and date of birth to whom complaint relates (if relevant)	<b>P01 P01</b> DOB: <b>P02</b> Male
Please supply the following information: - Date complaint received - Copy of written complaint (or written summary) and any other relevant documentation (including correspondence, photographs, statements, etc) - Steps taken/actions planned by approved provider in response to the complaint	As per department correspondence received, please see attached copy of compliant provided by the Centre Director on 07/09/2020. The Area Manager ( <b>P01 P01</b> P: <b>P03</b> ) is aware of the complaint and department correspondence.

Submitted By: **P01 P01**



Please upload any relevant documentation

Isaacs - complaint.docx

Goodstart Isaacs

## Contact Details

Name

**P01** **P01**

Phone Number

**P03**

Email Address

**P03**