



Community Feedback Survey

Feedback plays a vital role in delivering a service that meets the needs of everyone involved.

Name (Optional): _____

Please send your feedback form to the service email, admin email, via our PO Box or in person

Are you a:

- ☐ Family of our service
- ☐ Employee of ACI
- ☐ Child who attends a service
- ☐ School representative
- ☐ Community Member

This feedback is in relation to:

- ☐ Service operations
- ☐ Management of Activity Centres
- ☐ Staff of Activity Centres
- ☐ Policies and Compliance of Activity Centres

Details of Feedback:

Would you like to be contacted regarding the feedback you have provided? ☐ Yes ☐ No

If yes, please provide an email or phone number: _____

Thankyou for taking the time to give us valuable feedback, it is always
Welcome.