



EXPERIENCE OF CONTACT SESSIONS: PHARMACIST'S ASSISTANT PROGRAMME

*"We are thankful for customers who complain,
it allows us to improve."*

If you are unhappy or want to suggest how we can improve the service we are currently providing, please complete this form and email it to training@sbuys.co.za or fax it to 0865690222.

You can complete this form anonymously. This form is confidential. Your information will never be available to employees. However, if your details are relevant to an incident or you would like us to provide feedback, kindly fill in the details.

I am a learner and would like to stay anonymous.	
I am a tutor and would like to stay anonymous.	
I want the S Buys Academy to give me feedback regarding this complaint - see contact details below.	

Name and Surname: _____ TDA number: _____

Please get in touch with me via the following (give details)

Email:	
Telephone number:	
Cell phone number:	

My complaint is about

(Please mark the relevant block with an X)

Date of completion of the form: _____

Booking procedure	
Audio-visual presentations	
Facilitator (presenter)	
Study material	
Summative assessment	
Assessor	
Other	

Please describe your complaint or suggestion.

If the following is relevant, please complete the following:

Facilitation/Assessment center: _____ Date of occurrence: _____

Booking Coordinator/Facilitator/Assessor name: _____

Office use only	Action taken:
Date received:	Signature: