



THE  
LUTHERAN  
WORLD  
FEDERATION

Department  
for World Service

member of **overtalliance**

<https://kenyasomalia.lutheranworld.org>

**CONFIDENTIAL**  
**Lutheran World Federation**  
**Kenya Somalia Program**

**COMPLAINT AND FEEDBACK FORM**

*This form can be completed by the person wishing to send a complaint or by a third party.  
All information must be held confidentially.*

Please fill in as much as possible. You may wish to leave some questions out, but the more information you can provide the better it is. It will make it easier for us to follow up on your complaint.

**A: General data**

1. Your name:
2. Sex (Male / Female)
3. Your age:
4. Address:
5. Telephone:
6. Your email:
7. Name of the person or persons you wish to lodge a complaint against (if known):

**B: Give a brief description of the incident.** State what happened, trying to follow the sequence of events from start to finish.

1. What is the specific complaint:
2. When did it happen (the date of incident):
3. At what time (if you know):
4. Where did it happen? (The place of incident):

**C: Name of witnesses** (if any). Include where they can be contacted, if known;

**D: State what kind of a response you expect from LWF and how you wish to see the matter resolved**

[SUBMIT FORM](#)