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| Name of  Complainant: | Rank: |
| Department: | Supervisor/HOD: |
| Complaint Made to: | Date of Initial Complaint: |
| Ship | Master |

***NOTE: A seafarer making a complaint should refer to the onboard HR and/or to the respective crew representatives and has the right to be accompanied or represented at any investigation or conciliation by another seafarer of their choice on board the ship***

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| Details of Complaint: |

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| Actions Taken | Date Resolved: |

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| If not resolved –further actions taken |

|  |  |
| --- | --- |
| HOD Signature | Seafarers Signature |
| Master Signature | MLC Mediator Signature |

***A copy of this report must be given to the seafarer making the complaint.***