



Province of the  
**EASTERN CAPE**  
EDUCATION

**CUSTOMER COMPLAINTS FORM**

FOR OFFICE USE ONLY

**Form of complaint:** ☐ Personal ☐ Telephonic ☐ By Facsimile ☐ By E-Mail ☐ Internet

**Origin of complaint:** ☐ Internal ☐ External

**Date Received:**           **Received by**

**Time Received:**

**Date Captured:**           **Reference Number**

**Step 1: Personal Details of the Complainant**

**Names of a Person:**

**Organisation / Department:**

**Division/Section/School:**

**Physical Address:**

**Postal Address:**

**Contact Numbers:** Telephone  Cell

**E-mail Address:**

**Choose the preferred method of communication:** ☐ Physical Address ☐ Postal Address ☐ Telephone

☐ Cellphone ☐ E-Mail ☐ Other (specify)

**Step 2: Details of the complaint**

In order for the Customer Care Centre to understand your complaint, when writing try to include all of the following in your explanation:

**WHEN** did you encounter the problem? See the attached correspondence

**WHERE** did the problem occur?

**WHICH** Directorate or Sub-Directorate is involved?

## CUSTOMER COMPLAINTS FORM

Explain clearly **WHAT** the problem is?

After completion, send the form to the Customer Care Centre.

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