|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **شرح شکایت را در قسمت زیر مرقوم فرمایید** (description of complaint) | | | | |
|  | | | | |
| **شکایت کننده و اطلاعات تماس ایشان** (complainant and relevant contact information) | | | | |
| شخص حقیقی (private person) ، نام (name) : Choose a building block. تلفن : Choose a building block. | | | | |
| شخص حقوقی (corporate entity) ، نام (name) : Choose a building block. تلفن : Choose a building block. | | | | |
| **لطفا از این قسمت به بعد چیزی ننویسید – فقط مخصوص نهاد صدور گواهی**  **Please do not write anything from below part – Only for Certification Body** | | | | |
| *complaint type* | | | | |
| related to Nobel certification activities | | related to the product, process or service of a certified client | | |
| checking if the persons who invloved in certification process relevant to this complaint are not assingned for handling this complaint . | | | | |
| *analyzing & validating complaint* | | | | |
|  | | | | |
| according to analysing & evaluation , complaint is :  Valid  Not-Valid | | | | |
| responsible for handling : | | assigned number : | date : | |
| *actions against complaint* | | | | |
| No | required Action | responsible | | dead time |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
| date of updating complainant for investigation progress : | | | | |
| recipient person in client organization : | | | | |

|  |  |
| --- | --- |
| *control of Action implementation & effectiveness* | |
|  | |
| Date of updating Complainant for investigation progres : | |
| Recipient Person in client organization : | |
| *decision for making publicly accessible (after discuss with client & complainant)* | |
| Complaint Could be Accessible to Public | Complaint Could not be Accessible to Public |
| *If Complaint could be accessible to public , the extent & resolution of information which could be accessible :* | |
|  | |