THE DOCUMENTATION CENTER OF CAMBODIA (DC-CAM)
PUBLIC INPUT
(COMMENTS, QUESTIONS, COMPLAINTS)

PROCEDURE

INSTRUCTIONS
DC-Cam welcomes comments, questions, or complaints to drive improvements to its services and support to the public. You may submit this form either electronically to the email address provided or you may leave a copy in the Public Input Box. Individuals are encouraged to provide as much information as possible to ensure DC-Cam can adequately use or respond to your input. DC-Cam will accept anonymous complaints. All information you provide on this form is voluntary. Please write legibly in Khmer or English.

PRIVACY NOTICE
DC-Cam may share any/all information you provide within this Form to DC-Cam’s donors, consultants, board members, interested parties, and stakeholders as it deems appropriate. DC-Cam may also share information in this Form with the public as part of its monitoring and evaluation, accountability, and transparency reports.

1. First Name: __________________________________________

2. Middle Name: _________________________________________

3. Last (Family) Name: ___________________________________

4. Nationality: ___________________________________________

5. Email: _______________________________________________

6. Telephone: ___________________________________________

7. Address: ______________________________________________

_____________________
_____________________

8. Organization Name: ____________________________________

9. Organization Email: ____________________________________

10. Organization Phone: ____________________________________
11. Type of Input:  ___ Question  ___ Comment  ___ Complaint

12. May we contact you if we have additional questions?  ___ Yes  ___ No

13. What is the preferred way in which you may be contacted?  ______________

14. Additional Information:  ________________________________
   ________________________________
   ________________________________
   ________________________________
   ________________________________
   ________________________________
   ________________________________
   ________________________________
   ________________________________

FOR PIR INTERNAL USE ONLY

Reviewed By:  __________________________________________
Date of Review:  ________________  Action Taken:  ___ Yes  ___ No
NOTES:  _______________________________________________