

1. Your contact information

(a) What is your name, address, preferred telephone contact number and alternate telephone number (please state whether these numbers are for home, work, cell, pager or other), e-mail address (if any), fax number (if any)? Please write in the space below.

(b) What is your relationship to the person who made the personal directive?

2. Information about the person who wrote the personal directive (if known):

What is the maker's name, address, preferred telephone contact number and alternate telephone number (please state whether these numbers are for home, work, cell, pager or other), e-mail address (if any), fax number (if any). Please write in the space below.

3. Information about the agent (person named in the personal directive to make decisions on behalf of maker and who is the subject of your complaint) if known:

What is the agent's name, address, preferred telephone contact number and alternate telephone number (please state whether these numbers are for home, work, cell, pager or other), e-mail address (if any), fax number (if any). Please write in the space below.

4. Information about the personal directive

(a) Do you have any other information about the personal directive (such as areas of agent's authority to make decisions)? If so, please write in the space below.

(b) What is the date when the personal directive was brought into effect (if known)?

5. Nature of your complaint

(a) What are the details of your complaint, including dates or time periods and any steps you may have taken to resolve the matter? Please write in the space below.

(b) If you think this complaint requires the urgent attention of the Public Guardian and there is immediate concern about the safety of the maker, please explain why in the space below.

NOTE: A complaint may only be made about a matter referred to in section 24.2 of the Personal Directives Act.

6. People who can provide further information

What are the full names, titles (if any), addresses and preferred telephone contact numbers and alternate telephone numbers of any person who may be able to provide further information about your complaint or about the maker's circumstances? *(Optional)*

Please write in the space below.

NOTE: If the subject matter of your complaint could be an offence under the Criminal Code (Canada), abuse against a client under the Protection for Persons in Care Act or an offence under another statute or regulation of Alberta, the Public Guardian will refer the complaint to a police service or appropriate government ministry in accordance with s24.6 of the Personal Directives Act.

Dated at _____ in the Province of Alberta this _____ day of _____
(location) (day)

(month) (year)

Signature of person making complaint

Your personal information is being collected under section 24.5 of the *Personal Directives Act* and will be used for the purposes of conducting an investigation or resolving a complaint under Part 4.1 of the *Personal Directives Act*, making a Court application under section 25 of the *Personal Directives Act* or as authorized or required under the *Freedom of Information and Protection of Privacy Act* or other enactment. If you have any questions about this collection, you may contact the Office of the Public Guardian at (780) 422-1868.