

Complaint Submission Form

Complaints and Inquiries

The College of Opticians of Alberta (COA) exists as the regulatory body for Opticians in Alberta. If you are not sure whether your inquiry will meet the requirements of a complaint, please contact the Complaints Director (complaints@albertaopticians.ca) for more information. For issues that do not meet the requirements of a formal complaint, the college may still be able to assist you in finding an appropriate solution or direct you to the correct avenue to resolve the concern.

In order to file a formal complaint, please ensure you have done the following:

- o Fill this form out to in full (wherever possible).
- Ensure all signatures are authorized. We accept handwritten or digital signatures, but it must include your full name.
- o Ensure all contact information is complete and accurate.

When the form is complete, please send it to one of the following:

Email: complaints@albertaopticians.ca (Complaints Director)

College Office: 201, 2528 Ellwood Drive SW, Edmonton AB, T6X 0A9

Fax: 780-426-5576 (Toll Free Fax: 1-800-584-6896)

What is the Process?

If your submission meets the requirements of a formal complaint it will be assessed by the complaints department and we will begin processing it.

- 1) We will assign the complaint a file number.
- 2) Both you and the optician in question will receive a Notice of Receipt of Complaint from the college. Please note: In addition to the Notice of Receipt of Complaint, the optician will receive a copy of your complaint. The optician will be asked to respond to the complaint and include any relevant information or evidence at that time. We ask that complainants similarly submit their initial complaint first and then submit any evidence that may contain sensitive information separately to ensure privacy.
- 3) We will begin our investigation. Depending on the complexity of the complaint, this process can take a while. We will update both you and the optician every 60 days or whenever the investigation requires contact, whichever is sooner.
- 4) When we have gathered enough information, the complaint will either be referred to an informal resolution, referred to a hearing, or dismissed.
- 5) You will have the opportunity to request a review of the decision if your complaint is dismissed. Informal resolution can only be used in certain instances and only if both parties agree to that form of resolution and if it is recommended by the Complaints Director.

Complainant Information

First Name:	Last Name:	
Preferred Pronouns:		
Mailing Address:		
Street:	Box #:	
City:	Province:	
Postal Code:		
Email:		
Phone:	COA Complaint Submission Form [2]	
Communication		
pre Phonil: I choose email as my main cor	nmunication preference with the college. Send	
complaint correspondence to the em	ail address provided above. I consent to receive	
information via email from the COA a	and its representatives for the purposes of cond	ucting
this complaint.	(initial h	ere)
Courier: I choose courier and/or mai	ll as my main communication preference. Send	
complaint correspondences to the co	urier/mail address provided above(initia	ıl here)
Optician Information		
First Name:	Last Name:	
Practice/Optical Name:		
City/Town:	<u></u>	

Complaint

Provide a clear description of the complaint(s) you have about the optician you identified
above. Please include as much detail as possible. Include in your description what the
optician did or failed to do to cause your complaint, including:

Note: This section is considered the body of your official complaint and will be sent to the optician. Please do

- a) What happened
- b) Where it happened
- c) When it happened (in chronological order).

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Complainant Signature:	
Date:	

Resolution

What do you hope will happen as a result of your complaint? Note: The COA cannot provide financial compensation, nor do we have the authority to enforce financial compensation by a registered optician. If you are looking for financial compensation, you should obtain legal advice.					
complete to the best of my knowl	e information provided in this complaint is true and ledge. I understand that the college will use the above eged conduct of the named optician.				
Name (please print):	Signature:				