

## Just take a few minutes before you begin

Please visit the check-list which outlines the requirements relating to your complaint.

If you have supporting documentation for your complaint, such as letters or reports, we advise that you print off the complaint form and send it with the supporting documentation in one

envelope to:		
Ombudsman for the Defence Forces 15 Lower Hatch Street Dublin 2 Ireland		
Before you start take a minute to check that your complaint meets the following requirements.		
Requirement 1		
The action I wish to complain about occurred after 30 November 2005.		
Requirement 2		
Requirement 3		
I have lodged a complaint about the action through the internal military complaints procedure. I am not satisfied with the outcome.		
Requirement 3 applies only to serving members of the Defence Forces. It does not apply to former members of the Defence Forces.		
Requirement 4		
The action does not relate to:		
Security or military operations		
Organisation, structure and deployment of the Defence Forces		
Terms and conditions of employment		
Administration of military prisons		
Requirement 5		
The action I wish to complain about has not been summarily dealt with		

according to Section 179 of the Defence Act, 1954. http://acts.oireachtas.ie/zza18y1954.17.html



## **Part 1: Personal Details**

Service Number: Rank:	
Name: (Required) Current Posting: Unit:	
Home address:	
Email: (Required) Home phone number: Work phone number: Mobile number: (Requin	red)
Please tick the boxes to You can choose any nu	show how you would like us to contact you.  mber of options:
Letter Email Home phone Work phone Mobile phone	
Part 2: Your Compl	aint
Please use additional pa	ages if necessary.
The action you wish t	o complain about:
Please give details of th of the action. (Required	e action you wish to complain about and your posting at the time
The negative affect o	f the action:



Please give a short outline how this action has adversely affected you. (Required)

The date when action took place:
Please give the date when the action took place or when you became aware of it. (Required)
Person or people responsible for the action:
Please provide details of the person or Office responsible for the action.
If they are military personnel please include their rank and Unit. (Required)
The internal complaint procedure:
If you are a serving member of the Permanent Defence Force (PDF) or the Reserve Defence Force (RDF) please give the date when you made a complaint through the internal Military Redress of Wrongs procedure (RoW). Please describe the outcome from that process and why you believe that this response is inadequate.



## Supporting documentation:

Please give details of any supporting documentation you are including with this complaint.
Any other information:
Use this section to give any other information that you think applies to your complaint.
Date: Please give the date when you completed this form.
ricuse give the date when you completed this form.
Signed:

Please bear in mind that the details of your Complaint will have to be submitted to the Defence Forces as part of the Preliminary Examination and Investigation. If you are making a complaint against a named person then that person must be given a chance to respond. By submitting this Complaint Form you are consenting to the matters you raise being made known to those involved.

If you have any questions about this please contact

Ombudsman for the Defence Forces 15 Lower Hatch Street, Dublin 2, Ireland T: +353 1 663 3222

W: www.odf.ie / E: admin@odf.ie