

## REGULATORY EXAMINATIONS COMPLIMENTS AND COMPLAINTS FORM

This form is used to lodge a compliment/complaint pertaining to an occurrence during the examination (i.e. not an appeal)

	SECTIO	N 1 CAND	IDATE'	'S INFO	RMATIC	N: CON	IPLIMENT	L CO	MPLAINT			
Name and Surname	ne Exam Type (Tick the appropriate exam)											
ID number		RE1 Regulatory Examination: FSPs and Ke Individuals in all Categories of FSPs										
Date of Exam							RE5	Regulatory Examination: Representatives in all Categories of FSPs				
Venue							Other		<u> </u>			
Contact no							Time o	ime of Exam (Tick the appropriate time)				
E-mail address							09h00	09h30	13h00	13h30	Other	
	<u> </u>							1	L	1	<u>-L</u>	
			CO	MPLIM	ENT/CO	MPLAINT	DETAIL:					
Candidate's Signatu	ure						D	ate				
nvigilator's Signatu	ıre						D	ate				
				(	OFFICE	USE O	NLY					
			SE	CTION	2 OUTC	OME OF	COMPLAI	NT				
Date Receive	ed						Date R	esolved				
Person Responsib						Date C	andidate is	-				
							te FSCA is	-				
Outcome:						Да	IE FOCA IS	notinea				