

COMPLAINT FORM

1. Details of the Complainant:-

1.1 Full Name :-.....
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1.2. Postal Address:-.....
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1.3. Telephone Numbers : -.....

2. Details of the deceased abroad:-

2.1. Full Name ((Mr./Ms.):-.....
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2.2. Passport Number:-.....

2.3. Sex:-

2.4. Married or Single:-

2.5. Age:-.....,,.....

2.6. Relationship to the complainant:--.....
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2.7. Date of Death :-

2.8. Cause of Death :-

3. Name and postal address of the Overseas Employer / Company including telephone numbers:-
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4. Name and postal address of Local Recruitment Agent with telephone numbers:-
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5. Name and postal Address of Foreign Agent with telephone numbers:-
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6. Departure date:-

7. Assistance required:
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