COMPLIMENTS FORM



Contact details (optional)

Title: ……………………..……………………..……………………..……………………..……………………..……………………..…………………..

First name: ……………………..……………………..……………………..……………………..……………………..……………………………

Surname: ……………………..……………………..……………………..……………………..……………………..………………………………

Email address: ……………………..……………………..……………………..……………………..……………………..…………………….

Contact number: ……………………..……………………..……………………..……………………..……………………..………………

Date: ……………………..……………………..……………………..……………………..……………………..……………………..…………………..

Details of your compliment:

Department being complimented: ……………………..……………………..……………………..…………………….

Person being complimented: ……………………..……………………..……………………..……………………..…………..

Once completed, please submit this form, along with any supporting documentation, to

[quality@petroc.ac.uk](mailto:quality@petroc.ac.uk)