FORM for Complaints - Proposals for Improvement

For: [ ] Complaint [ ] Proposal for Improvement

(please, tick one or both boxes)

Description of Complaint - Proposal for Improvement

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WSEAS Quality Department

You can deliver it to the Secretariat anonymously or you can fill in this information
FIRST NAME – LAST NAME (optional):
EMAIL (optional):
TITLE: [ ] Prof., [ ] Dr. [ ] Mr./Mrs. (optional):
ACADEMIC ADDRESS (or COMPANY ADDRESS) (optional):

Do not write below this line:--
ID Number of this Sheet: (it will be fulfilled by the Department of Quality of the WSEAS)