**MINISTRY OF HEALTH**

**6η HEALTH REGION OF PELOPONESSE, IONIAN ISLANDS, EPIRUS AND WESTERN GREECE**

**GENERAL HOSPITAL OF CORFU “AGIA EIRINI”**

 **DATE:**

**POSITIVE FEEDBACK SUBMISSION FORM**

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| --- |
| **PERSONAL INFORMATION** |
| **Full Name**  |  |
| **Status**  | **Patient** |  | **Relative of Patient** |  | **Other** |  |
| **Address** |  |
| **Postal Code-City** |  |
| **Phone** |  |
| **E-mail** |  |
| **DESCRIPTION** |
| Please provide details such as who or what your feedback concerns: |
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**CONTACT DETAILS OF THE HOSPITAL:**

**Address**: Kontokali – 491 00 Corfu GREECE
**Phone**: +30 2661360800
**Email**: complain@gnkerkyras.gr ; manager@gnkerkyras.gr

**INFORMATION ON THE PROCESSING OF PERSONAL DATA**

The management of positive feedback is subject to the provisions of the **General Data Protection Regulation (GDPR) (EU) 2016/679**, as well as the provisions of **Law 4624/2019** on the protection of personal data.