



## COMPLAINTS AND APPEALS FORM

*This Complaint & Appeals Form must be lodged directly to the Administration Officer*

STUDENT NAME:

STUDENT ID:

COURSE:

ADDRESS:

SUBURB/CITY

STATE

POSTCODE:

MOBILE PHONE:

EMAIL:

**NOTE:** Students are encouraged to solve any complaint directly through discussion in the first instance. If this does not provide the solution to the problem, then the formal complaints and appeals procedure is to be followed.

*\* Attach Additional Pages if required*

### DESCRIBE YOUR COMPLAINT/ APPEAL

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### WHAT HAVE YOU DONE TO RESOLVE THE COMPLAINT/ APPEAL?

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**WHAT WOULD YOU LIKE TO SEE HAPPEN AS A RESULT OF THIS COMPLAINT/ APPEAL ?**

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Student's Signature: \_\_\_\_\_ Date (DD/MM/YY):        /        /

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Please submit to Administration Officer

Note: Commencement of process is within 10 working days of the formal lodgment of the complaint/ appeal and reasonable measures are taken to finalise the process as soon as practicable.

**OFFICE USE ONLY:**

Date Receipt:                      /        /

Date Resolved:                    /        /

<b>Send Acknowledgement Letter to student</b>	<input type="checkbox"/>
<b>Attach Complaint/ Appeal Tracking Form</b>	<input type="checkbox"/>
Complete Tracking Form and forward to Relevant Manager (Manager) _____	<input type="checkbox"/>