Student Complaints and/or Appeals Form

Name of Complainant/Appellant: .................................................................
Date: ..................

Nature of complaint/appeal: Training delivery [ ] Assessment [ ] Other [ ]
(please specify)

Training delivery
Course name: ........................................ Course code: ......................
Training date: ......................... Location: ..............................
Details of Complaint or Appeal:

Assessment process: Unfair [ ] Not clear [ ] Incomplete [ ] Other [ ]
(please specify)

Assessment date: ................. Location: ..............................

Assessor’s name: ........................................
Details of Complaint or Appeal:

...........................................................
...........................................................
...........................................................
Complaint or Appeal discussed with trainer/assessor?  Yes  No

Outcome of discussion ........................................................................................................

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Signature of Complainant/Appellant: ............................................Date: .............

Office use only

Submitted to Training Program Coordinator

By: ................................. Signature: .................................

Date: ................................. Resolved:  Yes  No

If Complaint/ Appeal not resolved

Submitted to Deputy Principal:

By: ................................. Signature: .................................

Date: ................................. Resolved  Yes  No

If Complaint/ Appeal not resolved

Submitted to Principal:

By: ................................. Signature: .................................

Date: ................................. Resolved:  Yes  No

Complainant/ Appellant sent written statement of complaint being received? Y / N

Complainant / Appellant sent written statement of action taken? Y / N

Complaint/ Appeal referred to a third party? Y / N

Time taken to resolve complaint/ Appeal: .............................................................

Finalised by: ....................................................

Signature:..................................................................................... Date: .............