Complaint Form

**Complainant Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Student ID (if applicable) |  |
| E-mail address |  | Contact number |  |
| Postal address |  |

**Details of the Complaint**

|  |  |
| --- | --- |
| Date of occurrence |  |
| Details of the complaint |  |
| Reason(s) for your complaint |  |
| Outcomes you are seeking |  |
| How can we improve to avoid these situations in the future? |  |

**Declaration**

By signing this form, I certify that the information provided above is true and correct.

|  |  |
| --- | --- |
| Signature |  |
| Name |  | Date |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ADMIN USE ONLY**  | **Full Name:** |  | **Signature:** |  |
|  | **Position:** |  | **Date:** |  |
|  |
| **Action:** |  | **Reason for decision:** |  |
| **Logged in Complaints Register:** | [ ]  No [ ]  Yes ▶ | **Logged by:** |  | **Date:** |  / /  |
| **Receipt letter sent:** | [ ]  No [ ]  Yes ▶ | **Sent by:** |  | **Date:** |  / /  |
| **Decision letter sent:** | [ ]  No [ ]  Yes ▶ | **Sent by:** |  | **Date:** |  / /  |
| **Appeal lodged:** | [ ]  No [ ]  Yes ▶ | **Reference number:** |  | **Date:** |  / /  |
|  |
| **CEO Signature:** |  | **Date:** |  / /  |