

## STUDENT COMPLAINTS FORM

| NOTICE OF COMPLAINT  |  |  |  |
|--|--|--|--|
| All Sections Must Be Completed by the Complainant  |  |  |  |
| 1. Surname: First name:  |  |  |  |
| 2. Student Identification Number:  |  |  |  |
| 3. Student Telephone Number:   |  |  |  |
| 4. Mailing Address:  |  |  |  |
| 5. Programme of Study:   |  |  |  |
| 6. Have you taken any informal action or spoken to anyone prior to filing this complaint in an attempt to resolve? If yes, give details below and include the outcome. |  |  |  |
| Use additional paper if needed.  |  |  |  |
| 7. Detail the complaint. Provide name/s of persons involved and witnesses (if any).  |  |  |  |



Use additional paper as necessary.

| 8. | What has been the impact on you arising from these circumstances?     |
|----|---|
| 9. | What outcome or result are you seeking as a result of this complaint? |
|    | 2)  |
|    | 3)  |



| 10.  | What evidence is being submitted to substantiate your complaint?   |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| (Contin  | us an asserts shouts (Attach suidenes as response)   |  |
| (Continue on separate sheets / Attach evidence as necessary) |  |  |
| Declar   | ration:  |  |
|  | As far as possible, all complaints will remain confidential unless there is a serious risk of harm to yourself or others. In the interest of natural justice, parties to a complaint have the right to know the full details of the complaint. |  |
|  | I declare that the information provided in this application is accurate and to the best of my knowledge.   |  |
| Si   | gned: Date:  |  |