**Complaints and Appeals Form**

For information related to this form, please see Australian College ‘*Complaints and Appeals Policy and Procedure*’.

Is this a: Complaint Appeal

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| --- | --- | --- | --- | --- |
| **Full Name:** |  | | | **Student ID:** |
| **Address:** |  | | | |
| **Email Address:** |  | **Phone No:** |  | |
| **Qualification/Course Undertaken:** |  | | | |

|  |  |
| --- | --- |
| **Details of your Complaint or Appeal:** | **Date of Occurrence:** |
| **Reason for your submission / concern**: *(Please provide as much detail as possible and attach any supporting evidence you may have to support your complaint/appeal)* | |
| **Occurrences leading up to this submission:** *(Outline any steps taken prior to submitting your formal complaint or appeal.)* | |
| **Details of any other parties involved:** *(Include full name and position)* | |
| **Outcomes you are seeking from this process:** | |
| **Complainant/Appellant Declaration** | |
| By signing this form, I confirm that the information provided is true and correct .  **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |