

## **Complaints and Appeals Form**

To be read in conjunction with the Complaints and Appeals Policy and Procedure at itfe.edu.au

Complainant Name:						
Date:/ Qualification (if applicable):						
Email:Mobile:						
Date of the event that led to the complaint (if applicable)://						
Please provide details of complaint:						
How would you like this to be resolved?						
Complainant Signature:	Date:	/	/			
Staff Member handling the complaint:						
Signature:	Dato					



Office Use Only. Resolution Details:						
Tick	Action Required	Staff Initials	Date			
	Form submitted					
	Logged in Complaints and Appeals Register					
	Form received by Administration					
	Attachments to this complaints (where applicable)					
	Improvements logged in CI Register					
	Resolution Achieved					
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