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| **Please complete and return to Chloe Lockett (complaints co-ordinator) who will acknowledge receipt and explain what action will be taken.** **Name of person making the complaint:**  |
| **Students name:**  |
| **Relationship to the student:**  |
| **Address:** **Postcode:** **Day time telephone number:** **Evening telephone number:**  |
| **Details of the complaint.**  |
| **What action, if any, have you already taken to try and resolve your complaint.** **(Who did you speak to and what was the response)?**  |

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|  **What actions do you feel might resolve the problem at this stage?**  |
| **Are you attaching any paperwork? If so, please give details.**  |
| **Signature:** **Date:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Official use** **Date acknowledgement sent:** **By who:** **Complaint referred to:** **Resulting action:****Date:** **Signature** |