



COMPLAINTS AND APPEALS FORM

Student to complete and submit to the student services (reception) or Principal.

APPLICANT INFORMATION

Student Name:		Student ID:	
Address:			
Telephone:		Email:	
Date of incident:		Course:	
Type of incident:			

Did you receive a notice of intention to report to Department of Immigration and Citizenship (DIAC) from Queensford College?
YES NO *Please attach a copy of the letter.*

DETAILS OF COMPLAINT/APEAL/ASSESSMENT APPEAL

* Please attach a separate page if the space above is not sufficient to write the details of the Complaint/Appeals/Assessment Appeals

Did you speak with your trainer to resolve the complaint? YES NO

Did you speak with student services to resolve the complaint? YES NO

Student's Signature: _____ Date: ____ / ____ / ____

Note:

All complaints will be taken seriously and a written statement will be given, outlining the complaint or grievance, how it has been handled on appeal, the outcome and reasons for any decisions made.

The college's grievance procedures does not limit the rights of students to take action under Australia's consumer protection laws.



OFFICE USE ONLY

Form Received By:	
Form Received Date:	____ / ____ / ____
Signature Receiving Officer	
Student Name:	Student ID: