

COMPLAINT FORM

Personal Details	Name:
	Student ID (if relevant)
Home Address	
	Suburb: Postcode:
Contact Details	Mobile:
	Home Phone:
	Email:
Course(s) Enrolled	
Intake(s) Date(s)	
Other (Please specify)	

Please state in full, your reason for the Complaint:

Signature:		Date:
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Office use only			
Received By:		Date:	
Entered into Complaint Register (SMS) by:		Date:	
Comments:			