

**COMPLAINTS AND APPEALS FORM**

Before completing this form, please read and understand the Complaints and Appeals Policy and Procedure.

<b>STUDENT NAME:</b>
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<b>DATE OF BIRTH:</b>
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<b>STUDENT ID NUMBER:</b>
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In order for us to efficiently resolve the issue concerning you, please provide the details of your Complaint /Appeal in the space provided below:

<b>DATE OF OCCURRENCE:</b>	<b>TIME OF OCCURRENCE:</b>
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<b>PLACE OF OCCURRENCE:</b>
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<b>NATURE OF COMPLAINT</b> (Any additional supporting documents should be attached to this form):
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<b>STUDENT SIGNATURE:</b>
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<b>DATE OF LODGING COMPLAINT/APPEAL:</b>
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**OFFICE USE ONLY****OUTCOME OF THE COMPLAINT:****Please Tick the following boxes when the process has been actioned**

- The student has been notified of the outcome of their complaint in writing
- The resolution phase commenced within 5 working days of the complaint being lodged.
- A maximum of 30 working days from commencement will be allowed for the resolution phase of a complaint, unless all parties agree in writing to extend this time.

**SIT Representative Name:****SIGNATURE:****DATE:**