

Complaint Form

PART A: APPLICANT INFORMATION				
Name:	Date:			
Who or what is your complaint about, if applicable and known?				
Are you a student?	Your student number.			
Contact	Alternative contact number:			
Street Address:				
Suburb:	State: Postcode:			
	State: Ostcode: Ostco			
Email:				
PART B: INFORMATION ABOUT YOURCOMPLA	INT			
	rsons, please identify the person, their position and how they relate to you.			
Name of person/s:				
Position:	Relationship to you:			
What is the nature of your complaint?				
Please briefly state your allegation(s), the alleged 'wrong doing' only. Some examples are provided. 1. I have been subjected to harassment by my teacher, Mr. Smith over the last six months on several				
occasions.				
 I was not provided with the assessment requirements for my course in a timely manner. My teacher Jane Eyre consistently turns up late for class and is disorganised and unprepared. 				

PART B: INFORMATION ABOUT YOUR COMPLAINT – continued				
Please provide specific details of the events that occurred, in chronological order, and name the person(s) your complaint concerns. If your complaint relates to a specific incident (or incidents) it is useful to provide approximate dates, times and records of what was said (as far as you can recall). Please attach additional information as required.				
Date: What happened?				
Date: What happened?				
Date: What happened?				
Date: What happened?				
Date: What happened?				
Date: What happened?				
Date: What happened?				
	vents? If so, please list their name and contact number.			
Name:	Contact number:			
Name:	Contact number:			
Name:	Contact number:			
Name:	Contact number:			

PART B: INFORMATION ABOUT YOUR COMPLAINT – continued			
Has this happened before? Yes No If yes, please provide details of the previous incidents:			
Have you told anyone at OCT (for example, your trainer or the CEO) about your complaint either informally or formally? If yes, who have you told about your complaint and what action (if any) have they taken?			
Is there any other information you would like to include?			

Signature:		Date:
Office Use ONLY		
Date Received:	Received by (print name):	Signature:
Date forwarded to RTO Manager:	Forwarded by (print name):	