

## **Complaints or Appeals Record Form**

Please submit to the RTO Manager or Principal

Date raised:	
Student:	
Year:	
VET Subject:	

REASON(S)	ТІСК
AQF Standard	
Student Complaint	
Staff Complaint	
Student Appeal (eg:	
Assessment Decision)	
Other (Specify)	

Nature of Complaint/Appeal (please use specific detail and include date):   Cause:   Student's Signature:	Section 1		
	Nature of Complaint/Appeal (please use specific detail and include date):		
Student's Signature: Parent's signature:	Cause:	Cause:	
Student's Signature: Parent's signature:			
Student's Signature: Parent's signature:			
Student's Signature: Parent's signature:			
Student's Signature: Parent's signature:			
Student's Signature: Parent's signature:			
	Student's Signature:	Parent's signature:	

Section 2	
Action to be taken:	
Accepted by:	Position:

Document title: File location: Version date: Ownership: Complaints and Appeals Record Form Complaints and Appeals Record Form 27 February 2024 Version 1.0 Kingston State College

Review date: December 2024 Approved by: RTO Manager

## Kingston State College (RTO 30386)



Agreed (Date):	
Action required by:	Signed by RTOM:

Section 3		
Agreed Action completed and effective:		
RTO Manager	Signed by RTOM:	

Final Decision of Independent Review:		
Position:		
Signed:		

## This Completed Form needs to go to the RTO Manager to be recorded in the 'Complaints and Appeals' Register.

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