

STUDENTS COMPLAINTS AND APPEAL FORM

Instructions for Students:

- This form should **ONLY** be used for the following:
 - to lodge an official complaint and appeal against academic assessment
 - or any matter which the student has found to be offensive, discriminatory or derogatory in any aspect of their student life at Stirling Institute of Australia.
 - Appeals against the result of an application for special consideration in relation to an individual student;
 - Appeals against the application for suspension/deferment/cancellation of enrolment:
 - Any request for a student's appeals must be made in writing, using this form
 - General Complaints
- Complaints & Appeals form will be provided in accordance with Stirling Institute of Australia Complaints and Appeals Policy & Procedure
- You should read the policy and procedures carefully to establish your eligibility for an Complaint or Appeal.
- Before your form for an Appeal will be considered, you must complete all the sections below and attach documents relevant to your application
- Complete this form and submit to the Training Manager at info@sia.edu.au
- Clearly state the nature of your complaint and, if appropriate, indicate what evidence you have to support your claim.

STUDENT'S PERSONAL DETAILS:

Student ID No:		Date of Birth:	
Title:	Given Name:	Family Name:	
Postal Address:			
State:	Postcode:		
Home Phone:	Mobile No:		
Email address:			

COMPLAINTS & APPEAL

Course Enrolled:			
Date Complaint submitted:	Date of Event/Complaint		
Nature of Complaint & Brief Description			

<p>Reason of Complaint</p> <p><i>(Please provide as much details as possible)</i></p> <p>Note: Attach any supporting documents with this form as applicable.</p>			
<p>Description of Desired Outcome</p>			
<p>STUDENT DECLARATION:</p>			
<p>All the information I have provided in this form is true and accurate. I also understand that this complaint will be dealt with according to Stirling Institute’s relevant complaint and appeal policies and procedures</p>			
<p>Student Name:</p>			
<p>Signature:</p>		<p>Date:</p>	

<p>OFFICE USE ONLY</p>			
<p>Matter referred to:</p>	<input type="checkbox"/> CEO	<input type="checkbox"/> Training Manager	
	<input type="checkbox"/> Business Manager	<input type="checkbox"/> Appeals Committee	
<p>Comments of the Person Receiving the Form and Suggested Action</p>			
<p>Signature:</p>		<p>Date:</p>	