**STUDENTS COMPLAINTS, GRIEVANCE AND APPEAL FORM**

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| **Instructions for Students:**   * This form should be used to lodge a formal complaint, grievance or appeal. This includes all acaeminc an non academinc concerns. * Prior to completing this form we recommend you should read the Student Complaints, Grievances and Appeals Policy and Procedure * Please complete all the sections below and attach documents relevant to your application. Clearly state the nature of your complaint and, if appropriate, indicate what evidence you have to support your claim. * Subit the completed form to the Training Manager at [info@sia.edu.au](mailto:info@sia.edu.au) | | | | | | | |
| **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, GRIEVANCE & APPEAL** | | | | | | | |
| Course Enrolled: |  | | | | | | |
| Date Complaint submitted: |  | | Date of Event/Complaint | |  | | |
| Nature of Complaint & Brief Description |  | | | | | | |
| Reason of Complaint  *(Please provide as much details as possible)*  ***Note:*** *Attach any supporting documents with this form as applicable.* |  | | | | | | |
| Description of Desired Outcome |  | | | | | | |
| **STUDENT DECLARATION:** | | | | | | | |
| 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 | | | | | | | |
| **Student Name:** |  | | | | | | |
| **Signature:** |  | | | **Date:** | |  | |

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| **OFFICE USE ONLY** | | | | |
| **Matter referred to:** | CEO | | Training Manager | |
| Appeals Review Committee | | External | |
| **Comments of the Person Receiving the Form and Suggested Action** |  | | | |
| **Signature:** |  | **Date:** | |  |