

Complaint Form

Learning Partnerships



Section 1

Student making complaint to complete Section 1

Nature of complaint:

Student name:

Student signature:

Date:

Section 2

Staff member receiving this form to complete Section 2

Comments:

Staff member name:

Staff signature:

Date:

Forwarded to:

Director

Training Manager

Third Party

Date:

Section 3

Staff member conducting the investigation of the complaint is to attach a detailed report to this form.

Director will take action according to Learning Partnerships Complaints Policy.