

# COMPLAINTS AND APPEALS FORM

ESOS Standards 6 and 8

## STUDENT DETAILS

STUDENT NAME			
STUDENT NUMBER		CONTACT NUMBER	
EMAIL			

## Type of Complaint, or Request for Appeal (please tick)

<input type="checkbox"/> GRIEVANCE / APPEAL	<input type="checkbox"/> COMPLAINT	<input type="checkbox"/> ASSESSMENT DECISIONS
<input type="checkbox"/> CLASSROOM DISCRIMINATION	<input type="checkbox"/> OTHER (please state):	

## Details Of Complaint / Appeal (attach extra sheets as required, including all required evidence)

### Student Declaration

I acknowledge that I have read, understand, agree with and shall abide by the terms and conditions of the Qii Complaints and Appeals policy, which may be downloaded from <http://www.qii.qld.edu.au/student-services/Forms-Policies.html>.

STUDENT SIGNATURE \*

DATE

D	D	/	M	M	/	Y	Y	Y	Y
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\* If student is under 18, student's parent / suitable nominated relative must sign.

## OFFICE USE ONLY

RECEIVED BY		DATE RECEIVED	<table border="1"> <tr> <td>D</td><td>D</td><td>/</td><td>M</td><td>M</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>							D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y										
MANAGING PERSON		POSITION																	
OUTCOME/ACTION TAKEN																			
DEPT. NOTIFICATION:	Marketing <input type="checkbox"/>	Admissions <input type="checkbox"/>	Academic <input type="checkbox"/>	Finance <input type="checkbox"/>	Registrar <input type="checkbox"/>														
DATE OF NOTIFICATION:	Mkg	Adm	Acd	Fin	Reg	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__									

## COMMENTS



CRICOS NO: 02763G RTO NO: 31353

Level 3 104-108 Margaret Street  
Brisbane City QLD AUSTRALIA 4000  
+61 (7) 3194 6549

### ADDITIONAL COMMENTS

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### VERSION CONTROL

VERSION: 2.1	DATE APPROVED: 07/12/2015	APPROVED BY: Jasmine Haynes	POSITION: Compliance and Business Development Manager
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