

## Complaints and Appeals Form

Your Details	
Date:	
Your Name:	
Student ID:	
D.O.B	/ /
Contact Details:	Phone: _____ Address: _____ _____ Email Address: _____
Please indicate which of the following applies to you:	
<input type="checkbox"/> Prospective student	
<input type="checkbox"/> Current student	
<input type="checkbox"/> Past student	
<input type="checkbox"/> Workplace or Employer	
<input type="checkbox"/> Partner Organization	
<input type="checkbox"/> Other _____	



Please indicate if you are lodging a complaint, appeal, or an assessment appeal.

- Complaint
- Appeal (unrelated to assessment)
- Assessment Appeal
- Discipline/Misconduct Outcome
- Other

Does your complaint involve behaviour by GCLC staff member?  Yes  No

Have you lodged a complaint about this issue before?  Yes  No

If yes, when: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. Please outline the reasons for your complaint or appeal in as much detail as possible. You may attach additional pages and supporting information/documents as needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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For complaints and appeals not related to assessment, please complete the following.

2. Please make any suggestions you have to resolve this issue.

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3. Are there particular staff members of GCLC who may need be involved in the investigation of this complaint or appeal and in what way?

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For assessment appeals, please complete the following.

4. Which unit and/or task is this appeal in relation to?

### Privacy Declaration

Personal Information collected by GCLC is protected by the Privacy Act 1988 (the 'Privacy Act')

GCLC will only use this information provided on this form to resolve your complaint/appeal. We will usually provide the information to other parties within GCLC that may have information relevant to your complaint/appeal so that it can be managed.

Your personal information will not be provided to any person you are complaining about, unless it is specifically required to ensure your complaint / appeal is appropriately dealt with. None of the information you provide on this form will be disclosed outside of GCLC without your permission, unless we are required to do so by law.

### Student Declaration

I declare the information provided in this application is accurate and I have read and understood the information regarding the complaints and appeal policy and procedure of GCLC.

Signed:

Date: / /

Printed Name:

**Please return this form using the details below.**

**In Person** - Please return the completed form to: ATTN: Student services coordinator

**Via Email** - info@goldcoaststudy.com

