

Complaints Form

1 Personal Details

Name:	.....	Student No:	.....
Address:	.....	Course:	.....
	.....	School:	.....
	.....	Year of study:	.....
	.....	Full/Part time:	.....
Telephone Number:	.....	Email Address:	.....

2 Please briefly outline your complaint

.....

(Please continue on a separate sheet if necessary)

3 What Action (if any) have you taken to deal with your complaint locally?

.....

(Please continue on a separate sheet if necessary)

4 Please give names of any staff members you have spoken to relating to the issues raised

.....

(Please continue on a separate sheet if necessary)

5 What would you like TrainPlus to do to resolve your complaint?

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(Please continue on a separate sheet if necessary)

I declare that the information provided on this form is a true and accurate account of circumstances surrounding my complaint. I agree to TrainPlus making independent checks on the information provided and will co-operate with any investigations. Where appropriate I will provide relevant documentation to substantiate my complaint. I have read the information sheet and understand that I will not be penalised for making a genuine complaint, however any false or inaccurate statements may result in disciplinary action against me.

Complainant
Signature:

Date: