

## **COMPLAINTS FORM**

HOW TO SUBMIT: Collect this form from front desk or download from the website. Please fill the form and submit to the Student Service Officer or front desk or by post or email at <a href="mailto:support@alphainstitute.edu.au">support@alphainstitute.edu.au</a></a>

| Participant Name:  |   |                             | Participant ID Number: | Participant ID Number:                           |  |
|--|---|-----------------------------|------------------------|--|--|
| Telephone:   |   |                             | Date of Incident:      | Date of Incident:                                |  |
| Please tell us what<br>the complaint is<br>about   | The College □   | The premises or equipment □ | Staff member □         | Trainer /Assessor □                              |  |
|  | Work placement □  |                             | Another student □      | Other  |  |
| Please describe in detail the matter that you want to raise as a complaint   |   |                             |                        |  |  |
|  |   |                             |                        |  |  |
| Complaint Resolution - Please answer the questions below then describe efforts made to resolve the issue around the complaint following our procedures   |   |                             |                        |  |  |
| Have you discussed this with the person involved? Yes \( \Delta \) No \( \Delta \) or the trainer Yes \( \Delta \) No \( \Delta \)   |   |                             |                        |  |  |
| or a relevant member of staff Yes $\square$ No $\square$ Name of the discussed with:   |   |                             |                        |  |  |
| If you are filling in this form, does this mean you are not satisfied with the suggested resolution? Yes \( \square \) No \( \square \)  |   |                             |                        |  |  |
| and communicate with yo  | u about this.   |                             |                        | ill treat your complaint following the procedure |  |
| <ul> <li>By lodging this form, I certify that the information I have provided on this form and in the attachments to the form is true, accurately represents the facts and includes all information relevant to my complaint.</li> <li>I understand that if I am not satisfied with Alpha Institute decision I can lodge an external appeal to <a href="mailto:skilling@education.gov.au">skilling@education.gov.au</a> can also go to the Overseas Student</li> </ul> |   |                             |                        |  |  |
|  | Ombudsman www.oso.gov.au Ombudsman at <a href="https://www.ombudsman.gov.au">www.ombudsman.gov.au</a> and inform to Alpha Institute within 5 days of lodgment.  Participant Signature:  Date: |                             |                        |  |  |
| Turticipant Signature.   |   |                             | Dutc.                  |  |  |
| Alpha Institute decision   | 1:  |                             |                        |  |  |
| Decision made by: Signature & Date:  |   |                             |                        |  |  |
| Decision noted by pa   | Decision noted by participant Participant signature & date:   |                             |                        |  |  |