

Complaint Form



PAR A: APPLICAN INFORMATION

Name: Date:

Name of the section of CIT your complaint concerns (CIT location), if applicable and known:

Your relationship to CIT: Your CIT ID number: CIT

Contact number: Alternative contact number:

Street Address:

Suburb: State: Postcode:

Email:

PAR B: INFORMATION ABOUT YOUR COMPLAINT

If your complaint is about a particular person or persons, please identify the person, their position and how they relate to you.

Name of person/s:

Position: Relationship to you:

What is the nature of your complaint?:

PAR B: INFORMATION ABOUT YOUR COMPLAINT – continued

Please provide specific details of the events that occurred, in chronological order, and name the person(s) your complaint concerns. If your complaint relates to a specific incident (or incidents) it is useful to provide approximate dates, times and records of what was said (as far as you can recall). Please attach additional information as required.

Date: What happened:

Date: What happened:

Date: What happened:

Date: What happened:

Date: What happened:

Date: What happened:

Date:

PAR B: INFORMATION ABOUT YOUR COMPLAINT – continued

Has this happened before? Yes No If yes, please provide details of the previous incidents:

Have you told anyone at CIT (for example, your teacher or College Director) about your complaint either informally or formally? Yes No

If yes, who have you told about your complaint and what action (if any) have they taken?

Is there any other information you would like to include?

Name:

Date: