



COMPLAINT LODGMENT FORM

Student details:

Student Name:	
Student ID:	Date of Birth:
Address:	
Phone:	Email:
Current Course:	Intake Date:

Complaint Details:

Reason for Complaint – Choose from following:

<input type="checkbox"/> Assessment	<input type="checkbox"/> Staff Member (s) (please specify) _____
<input type="checkbox"/> Attendance	<input type="checkbox"/> HIA service (s) (please specify) _____
<input type="checkbox"/> Other (please specify) _____	
Have you complained about this before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you wish to formally present your case? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Complaint summary:

Please outline details regarding your complaint, including date (s), people involved:



What actions have you taken, in an attempt to solve this matter:

What action/resolution would you like to see occur/implemented:

Student Declaration:

I, _____, hereby declare that all the documents and information provided are true and genuine.

I have read and understood the HIA Complaints Policy and acknowledge that the other party to the complaint may be contacted in an attempt to resolve the issue.

I agree that HIA may conduct independent evaluation checks and that I may be requested to submit further information upon request or attend a meeting to discuss this matter further.

Student Signature

Date

