

VOCATIONAL EDUCATION COMPLAINTS AND APPEALS FORM

Student to complete and submit to the Senior Pathways office (A30)

	APPLICANT INFORMATION				
	Student Name:		Student ID:		
	Address:		,		
1	Telephone:		Email:		
	Date of Incident:		Course:		
1			course.		
	Type of Incident:				
	DETAILS OF COMPLAINT/APPEAL/ASSESSMENT APPEAL				
1					
	*Please attach a separate page if the space above is not sufficient to write the details of the details of complaint/appeal/assessment appeal.				
	Did you speak with your trainer to resolve the complaint? — Yes — No				
1	Did you speak with the Student Pathways office to resolve the complaint?				
	Student's Signature:	Date:	·		
	<u> </u>				
	Note: All complaints will be taken seriously and a written statement will be given, outlining the complaint or grievance, how it has been handled on appeal,				
	the outcome and reasons for any decisions made. Cairns State High School's grievance procedures does not limit the rights of students to take action under Australia's consumer protection laws.				
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	OFFICE USE ONLY				
	Form received by:				
Form Received date: Signature Receiving Officer:					
	Signature Receiving Officer: Student Name:	Student ID:			
	JUNE INCITIC.	Judiciil ID.			