

# Complaints & Appeals Form



Complainant Name		<b>COMPLAINT AGAINST</b> <input type="checkbox"/> Trainer <input type="checkbox"/> Student <input type="checkbox"/> RTO Staff Member <input type="checkbox"/> Employer <input type="checkbox"/> Resources <input type="checkbox"/> Assessment Tools <input type="checkbox"/> Nursing Education & Training Australia
Date Submitted		
Who is complaining (Please tick)	<input type="checkbox"/> Student <input type="checkbox"/> RTO Staff Member <input type="checkbox"/> Trainer/Assessor <input type="checkbox"/> Employer	
Form submitted to		
Other party/s involved		
C&A Register No		

Appeal's must be lodged within 7 days of initial result being determined.  
 Refer to the Complaints & Appeals Policy in the Student Handbook for procedure.

## DETAILS OF COMPLAINT/GREIVANCE/APPEAL

APPEALS: Have you discussed this matter with your trainer in an attempt to reach a decision? Yes/No

Complainant is given the opportunity to complete a Complaints Report Form, with this form, if there is not enough room on this form for the complaint. Complaints Form attached Yes/No

Signed By: \_\_\_\_\_

Date: \_\_\_\_\_

Form submitted to RTO Manager or CEO Date: \_\_\_\_\_

## RECOMMENDED ACTION REQUIRED FOR IMPROVEMENT

Written Acknowledgement (within 5 business days)

- Written acknowledgement has been given to the complainant

Initial Meeting: (within 10 business days)

- Complaint raised
- Initial meeting held to discuss with all parties involved in the complaint, in order to find a solution agreeable to all parties.
- Solution found and remedied (Please continue to Appeal Outcomes section)

Further investigation required: (within 60 calendar days)

- Referral to RTO Manager or nominated person.
- Referred to a third party/panel
- Referral to other services (ie counselling services or LLN)
- Referred to National Training Complaints Hotline
- Referral to government body (ie police, hospital)
- Referral to funding body (ie DET, VTG)

*The RTO is responsible for acting upon the subject of any complaint/appeal found to be substantiated.*

## APPEAL OUTCOMES

Action/Response Taken By:

Date:

## FEEDBACK FROM COMPLAINANT

- Satisfied with outcome
- Dissatisfied with outcome – Further action required
- Matter was dealt with within a reasonable timeframe Yes/No

**Other comment:**

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Complainant Signature:

Date:

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