



## **Complaint Form**

***Please complete and return to Headteacher's Personal Assistant (complaints co-ordinator) who will acknowledge receipt and explain the action that will be taken.***

|                                                                                                                                                |  |
|------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Your name:                                                                                                                                     |  |
| Pupil's name (if relevant):                                                                                                                    |  |
| Your relationship to the pupil (if relevant):                                                                                                  |  |
| Address:                                                                                                                                       |  |
| Postcode:                                                                                                                                      |  |
| Day time telephone number:                                                                                                                     |  |
| Evening telephone number:                                                                                                                      |  |
| <b>Please give details of your complaint.</b>                                                                                                  |  |
| <b>What action, if any, have you already taken to try and resolve your complaint.</b><br><br>(Who did you speak to and what was the response)? |  |

|                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| What actions do you feel might resolve the problem at this stage?                                                                                                                                                     |  |
| Are you attaching any paperwork? If so, please give details.                                                                                                                                                          |  |
| Signature:<br><br>Date:                                                                                                                                                                                               |  |
| <b>For Official use only</b><br><br>Date acknowledgement sent by<br><br>Complaint referred to<br><br>Complaint referred on (date<br><br>Complaint resolved at which stage<br><br>Complaint recorded in school records |  |

|                                                                 |  |
|-----------------------------------------------------------------|--|
| Complaint referred to ( <b>staff member investigating</b> )     |  |
| Date:                                                           |  |
| <b>Outcome: (to be completed by staff member investigating)</b> |  |
| Resolved/unresolved – Please indicate                           |  |
| Further action:                                                 |  |
| Signature<br><br>Date                                           |  |