## Riverside Christian College Complaint Form



## **Complainant Details**

Riverside Christian College takes seriously all concerns and complaints from the College community and we appreciate this feedback. If you have attempted to resolve your concern with the relevant staff member/s and Heads of College and are unsatisfied with the outcomes, please complete this form and submit through College Administration.

Full Name:	
Daytime Phone:	Mobile:
Email:	
Preferred contact method:	
Student Name/s & Year Level/s (if applicable):	
Subject of Complaint	
Student Staff Activity Activity	dministration Policies/Procedure
Facilities Curriculum Classroo	m Other (please state)
Has this complaint been raised previous	sly? (Y / N) If so, give details.
Complaint Details	
Today's Date:	
Date of Incident:	
Nature of Complaint:	
Has there been an attempt to resolve the issue di	rectly with a staff member?
NO YES (Please give names and dates bel	ow)
Has there been an attempt to resolve this concern	n directly with a Head of College?
NO YES (Please give names and dates bel	ow)

Complaint Details: (please provide as much detail clear description of what happened in chronologic	as possible including names, dates/times and a lateral area alorder. Attach additional pages if required)
Desired Outcome (if relevant)	
OFFICE USE ONLY	
Receiving Staff Member:	
Date:	Time:
Date Receipt of Complaint acknowledged:	
Action Taken:	