STUDENT COMPLAINTS

RECORD FORM

Before completing this form you should read and follow the guidance given in the *Student Complaints Procedure*.

Full Name		**Male/ Female**
Student Status Enquirer/Applicant/Current Student/Past Student/Other *(please specify)*		**Date of Birth**
Student Number if applicable		
Contact Address		
Postcode		
Telephone		
E-mail		
Complaint to be directed to (if known) *(Name, Position, School/Service/Unit/Department)*		
Statement of Complaint *(Please explain the nature of your complaint here or attach a statement of your complaint)*		
List of documents *(Please list all documents which you have attached)*		**Received**

Nature of redress sought *(Please indicate what outcome or further action you are expecting)*	
Signature	**Date**
***Note*: If this form has not been completed by the person making the complaint, please complete this section**	
Name:	**Signature**
Relationship to the person making the complaint:	
FOR OFFICE USE ONLY	
Date considered by the Course Manager:	
Date acknowledgement sent to complainant:	**Further details required from student: Yes/No** **Date request sent: Date received:**
Complaint sent to: **Date sent:**	
Outcome:	
Nature of response:	
Date of response:	
Any further action:	
Date feedback form sent to complainant: **Date feedback received from complainant:**	
Date of issue of Completion of Procedures letter:	