

## Complaints and Appeals Form

*True Education Pty Ltd t/a Technical Education Development Institute and t/a Technical Electronics Centre (hereby referred as TEDI)*

### Personal Details:

<b>Full Name:</b>	
<b>Position of Complainant/Appellant:</b>	
<b>USI no:</b>	
<b>Phone No:</b>	
<b>Email:</b>	
<b>Address:</b>	

**If the complainant is student, please provide the following details (NOT MANDATORY)**

<b>Student ID:</b>	
<b>Course Name:</b>	
<b>Date:</b>	

### Complaint Details

Complaint Details	Appeals Details
<p style="text-align: center;">Date the cause of complaint occurred:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;"><b>Reason for the complaint:</b></p> <p style="text-align: center;"> <input type="checkbox"/> General Operations  <input type="checkbox"/> Assessment outcome  <input type="checkbox"/> ESOS related complaint  <input type="checkbox"/> Other, please specify         </p> <p style="text-align: center;"><b>Have you complained about the issue before?</b></p> <p style="text-align: center;"> <input type="checkbox"/> Yes    <input type="checkbox"/> No         </p> <p style="text-align: center;">If yes, please give the date, the complaint was lodged:</p> <p style="text-align: center;">_____</p>	<p style="text-align: center;">Date to which this appeal refers to:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;"><b>Reason for the appeal:</b></p> <p style="text-align: center;"> <input type="checkbox"/> Assessment outcome  <input type="checkbox"/> Discipline/misconduct  <input type="checkbox"/> Any outcome of any application for request  <input type="checkbox"/> Any disciplinary action taken against you.  <input type="checkbox"/> Other, please specify below         </p>

<b>Complaint Summary</b> (Please give detailed explanation of the complaint/appeal and attach any supporting evidence) (Provide explanation on how you believe this complaint can be resolved)	
<b>Please provide us a detailed explanation on what will resolve this issue according to you?</b>	
<b>Declaration</b>	
<input type="checkbox"/> All the information provided in this form is correct and accurate to the best of my knowledge. <input type="checkbox"/> I am happy to attend any meeting with relevant persons required to resolve the issue. <input type="checkbox"/> I understand that if I am dissatisfied with the decision, I can seek assistance through external appeal i.e. Commonwealth Ombudsman which is free of cost.	
Name: _____ Signature: _____ Date: _____	
<b>OfficeuseOnly: (*marked items to be filled up by staff or compliant handling party)</b>	
<b>*Receiving staff member:</b>	
<b>*Date:</b>	
<b>*Method of lodgment</b>	<input type="checkbox"/> Email <input type="checkbox"/> Mail
<b>*Name of the member responsible for resolving the issue.</b>	
<b>*Implementation of Proposed action by:</b>	<input type="checkbox"/> Continuous improvement Request. <input type="checkbox"/> Counselling by the relevant persons. <input type="checkbox"/> Change of any service or member. <input type="checkbox"/> External Counselling agency <input type="checkbox"/> Referred to: <input type="checkbox"/> Other (Please specify)
<b>*Date of Resolution</b>	/ /
<b>*Outcome</b>	<input type="checkbox"/> Successful <input type="checkbox"/> Unsuccessful



**Technical Education Development Institute (TEDI)**  
**Technical Electronics Centre**  
**RTO Code: 22300 CRICOS NUMBER: 03221G**  
**Level 5, 123 Lonsdale Street, Melbourne, Victoria - 3000**  
**Ph: 03 9043 3926, Website: [www.tedi.vic.edu.au](http://www.tedi.vic.edu.au)**  
**Email: [admissions@tedi.vic.edu.au](mailto:admissions@tedi.vic.edu.au)**

<b>*Method to communicate the outcome with the complainant/appellant</b>	<input type="checkbox"/> Email <input type="checkbox"/> Mail
<b>*Response of complainant/appellant</b>	<input type="checkbox"/> Agrees and accepts the decision done by panel (The student signs the acceptance and the record is placed in student's admin file)  <input type="checkbox"/> Disagrees and unsatisfied (Student has been advised of the right accessing external complaints handling body- Commonwealth Ombudsman along with contact details of the same)
<p><b>Declaration by Complainant/Appellant (Please read and tick before signing it):</b></p> <p><input checked="" type="checkbox"/> I acknowledge that the outcome of the complaint/appeal lodged by me have been informed to me.  <input checked="" type="checkbox"/> I agree with the decision made by the panel and I am happy to accept it.          OR  <input checked="" type="checkbox"/> I disagree with the decision made by the panel and would like to escalate it to an external complaint handling body, and I have been advised of all the required information in this regard.</p> <p>Signature: _____ Date: _____</p> <p><b>TEDI'S Representative</b></p> <p>Name: _____ Signature: _____ Date: _____</p>	