

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:

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

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

Student ID:	
Course Name:	
Date:	

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;">Reason for the complaint:</p> <ul style="list-style-type: none"> ▪ General Operations ▪ Assessment outcome ▪ ESOS related complaint ▪ Other, please specify <p style="text-align: center;">Have you complained about the issue before?</p> <p style="text-align: center;"> <input type="radio"/> Yes <input type="radio"/> 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;">Reason for the appeal:</p> <ul style="list-style-type: none"> ▪ Assessment outcome ▪ Discipline/misconduct ▪ Any outcome of any application for request ▪ Any disciplinary action taken against you ▪ Other, please specify below

Complaint Summary
 (Please give detailed explanation of the complaint/appeal and attach any supporting evidence)
 (Provide explanation on how you believe this complaint can be resolved)

Please provide us a detailed explanation on what will resolve this issue according to you?

Declaration

- All the information provided in this form is correct and accurate to the best of my knowledge.
- I am happy to attend any meeting with relevant persons required to resolve the issue.
- 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: _____

OfficeuseOnly: (*marked items to be filled up by staff or compliant handling party)

*Receiving staff member:	
*Date:	
*Method of lodgment	<input type="checkbox"/> Email <input type="checkbox"/> Mail
*Name of the member responsible for resolving the issue.	
*Implementation of Proposed action by:	<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)
*Date of Resolution	/ /
*Outcome	<input type="checkbox"/> Successful <input type="checkbox"/> Unsuccessful

*Method to communicate the outcome with the complainant/appellant	<input type="checkbox"/> Email <input type="checkbox"/> Mail
*Response of complainant/appellant	<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>Declaration by Complainant/Appellant (Please read and tick before signing it):</p> <ul style="list-style-type: none"> <input type="radio"/> I acknowledge that the outcome of the complaint/appeal lodged by me have been informed to me. <input type="radio"/> I agree with the decision made by the panel and I am happy to accept it. <p>OR</p> <ul style="list-style-type: none"> <input type="radio"/> 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>Signature: _____ Date: _____</p> <p>TEDI'S Representative</p> <p>Name: _____ Signature: _____ Date: _____</p>	