

COMPLAINTS AND APPEALS FORM

Student Number:
Email Address:
Address:
Course & Intake:

Please provide a personal statement detailing the matter relating to your complaint/appeal. Include name(s) of the person(s), dates and times, where applicable. Attach evidence and/or a separate sheet if additional space is required.

Have you tried to resolve the matter informally?	Yes	No
--	-----	----

Please provide a detailed explanation of any action(s) taken, including the name(s) of the person(s), date and times OR reason as to why no action was taken to resolve the matter informally. Attach evidence and/or a separate sheet if additional space is required.

I declare that the information I have provided on this form is true and complete and that it is my responsibility to provide the necessary documentation to support my application

Student Signature:	
Date	

Submit your application:

In-person: 62 Astor Tce Spring Hill QLD 4000

Email to: student.support@springhillcollege.edu.au