**STUDENT COMPLAINT FORM**

***Editable copies are available on the Bishopdale College website. If you wish to complete a digital form, please sign digitally and email to*** ***dean@bishopdale.ac.nz******.***

This form may be used by a **single complainant,** or when **two or more students** wish to file a joint complaint. If filing a joint complaint, you will need to choose one student who will be the primary contact person, who will submit this complaint.

If a complaint includes any allegations pertaining to another individual, that person will be notified and provided with copies of all relevant documentation, including a copy of section two of this complaint form.

All applicable sections of this form must be completed in order for a complaint to be formally valid and should be emailed, or a physical copy presented to the Dean, or if the Dean is unavailable, to the Registrar. A copy of complaints and the College’s response will be kept on file.

Where possible, the College attempts to resolve complaints within ten working days of the Student Complaint Form being received. The College will notify the complainants if a longer timeframe is required.

Upon resolution, you will be sent a written notification of resolution, detailing the outcome of the complaint process.

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| **SECTION ONE: COMPLAINANT DETAILS**Please select whether this is an [ ] Individual Complaint / [ ]  Joint Complaint |
| Please provide the name, student ID, phone number and email address of each complainant (if more than one complainant, the first student listed will be treated as the primary contact.) Each student must sign (digitally, or physically.) Attach additional pages as required.**PRIMARY COMPLAINANT:**

|  |  |
| --- | --- |
| Name: | Student ID: |
| Phone: | Email: |
| Signature: |

**ADDITIONAL COMPLAINANT:**

|  |  |
| --- | --- |
| Name: | Student ID: |
| Phone: | Email: |
| Signature: |

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| **SECTION TWO: COMPLAINT DETAILS** |
| What is your complaint regarding? |
| Provide a detailed description of your complaint, including relevant dates and times of any incidents (attach additional pages if required): |
| Detail any steps you have taken to resolve this complaint: |
| Describe your desired outcome: |
| When this form is completed, please* Email to the College Dean: dean@bishopdale.ac.nz, OR
* or give a physical copy to the Dean, or the Registrar if the Dean is unavailable.
 |

**OFFICE USE ONLY:**

Date Received:

Received By:

Date Logged in Database:

Resolved (Y/N):