

Complaint Form

When you are making a complaint it is necessary that the information you provide is clear and concise. Please be aware that this form may be presented to the Respondent/s (person/s you are complaining about), this is to allow the Respondent an opportunity to understand what the complaint is and to respond fully to any allegations. Confidentiality will be respected as much as is practical whilst also observing the right to natural justice. All complaints received will be considered and investigated, however Pines Learning reserves the right to decide the depth and form of its investigations. Please be aware that an investigation does not necessarily involve interviewing staff.

Please allow up to 10 working days for investigation and processing of your complaint. You will be notified in writing of the outcome.

Date:

Name of Complainant:
(your name)

Name of Respondent:
(person/s whom you are complaining about)

Date/s of incident(s):

How would you describe the incident/issue

<input type="checkbox"/> Bullying and/or Harassment	<input type="checkbox"/> Breach of OH&S laws/Policies
<input type="checkbox"/> Sexual Harassment	<input type="checkbox"/> Privacy/Confidentiality Policy
<input type="checkbox"/> Discrimination (describe grounds for discrimination)*	<input type="checkbox"/> Other Policy breach (define which policy)*

Description of Issue or Incident:

Grounds for claims of discrimination or particular policy breach:

Please list each incident/issue chronologically and for each incident/issue specify:

- Who did what (in just a few sentences)
- When (and how often)
- Where, and
- How do you believe there was a detrimental effect on you.

Outcome Sought - Briefly state the outcome that you seek from this process.

If you would like to provide further information please attach any statements to this form.

Number of pages attached

Signature