

APPENDIX 2: COMPLAINTS FORM

Please complete and return to the headteacher who will acknowledge receipt and explain what action will be taken.

Your name:

Pupil's name:

Your relationship to the pupil

Address:

Postcode:

Daytime telephone number: Evening telephone number:

Email address:

Please give details of your complaint:

What action, if any, have you already taken to try and resolve your complaint?
(To whom did you speak and what was the response)?

What actions do you feel might resolve the problem at this stage?

Are you attaching any paperwork? If so, please give details.

Signature:

Date:

Official use

Date acknowledgement sent:

By whom:

Complaint referred to:

Date:

