Complaint Form

Please make a copy or print this form, and return it to the school or Trust for the attention of the relevant professional e.g. Clerk, Head Teacher. They will acknowledge receipt of your complaint.

Your full name			
Student's name (if relevant)			
Your relationship to the student (if relevant)			
Address		Day time telephone number	
Postcode		Evening telephone number	
Email address			

Please provide a summary of your complaint.
Have you already spoken to anyone at the school and/or Trust about this complaint?

What do you feel might resolve the problem at this stage?
Are you attaching any additional evidence? If so, please give details.

Signed	
Date	

Official use only			
Who sent the acknowledgement?		Date of acknowledgement	
Who was the complaint referred to?		Has the Complaints Log been updated?	
Actions taken to resolve the complaint			