****

**Complaint form for students**

|  |
| --- |
| Date: |
| Full Name of student(s): |
| Course, or exam session, taken: |
| Host name, residence, or own accommodation – if applicable? |
| Description of complaint - Why are you unhappy? |
| How can we help? *Please now give your form to the school reception.* |
| Action taken by senior member of Staff recording incident: |
| Details of outcome: |
| Signed by member of staff recording incident: Date: |
| Countersigned student: Date:  |