

**INITIATOR DETAILS** 



## **Complaints and Appeals Form**

This Form may be raised by a staff member, student, employer, customer or visitor who uses or is affected by The Gordon's services whether provided by a Gordon staff member, contractor or student. The person who initiates the Form must complete all information on this page. Please try to provide sufficient, accurate and clear information to allow your issue to be directed to the Relevant Responsible Manager at The Gordon.

You have a right to lodge an anonymous concern, or request that your name be kept out of an investigation, however you should be aware that this may limit The Gordon's ability to fully investigate and respond to your concerns, refer to our *Complaints and Appeals Policy RISK P0 09* for further information.

In general, The Gordon does not investigate an issue which is over 12 months old unless you provide a clear reason why you could not have contacted us sooner. This form is pursuant to *Complaints and Appeals Policy RISK PO 09*.

| Your Name   |                 |  |                |                       | Da | te         |  |  |
|---|-----------------|--|----------------|-----------------------|----|------------|--|--|
| Email address   |                 |  |                |                       | Ph | one number |  |  |
| Student ID (if applicable)  |                 |  | Course Code ar | nd Name (if applicabl | e) |            |  |  |
| DETAILS OF COMPLAINT OR APPEAL Please complete details below and attach further information if needed eg details of any emails or conversations |                 |  |                |                       |    |            |  |  |
| What happened?  |                 |  |                |                       |    |            |  |  |
| When did it happen?   |                 |  |                |                       |    |            |  |  |
| Where did it happen?  |                 |  |                |                       |    |            |  |  |
| By whom (include names)?  |                 |  |                |                       |    |            |  |  |
| To whom (include names)?  |                 |  |                |                       |    |            |  |  |
| What were the consequences?   |                 |  |                |                       |    |            |  |  |
| What outcomes would you like?   |                 |  |                |                       |    |            |  |  |
| When making an 'appli<br>appeal' state the groun<br>appeal, as outlined in the<br>Complaints and Appeal<br>RISK PO 09                           | ds of the<br>ne |  |                |                       |    |            |  |  |

Email this form to <a href="mailto:rsw@gordontafe.edu.au">rsw@gordontafe.edu.au</a>.

Thank you for your voicing your concerns regarding The Gordon. You will receive an acknowledgement by the Risk, Safety and Wellness Office within two working days of receipt.

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