

Student Formal Complaint Form (Phase 2)

Privacy Statement

By completing this form, you are making a formal complaint to Taylors College Sydney (the College) under the Student Complaints and Appeals Policy and Procedures 2021 (the Policy). The College recommends in the first instance you discuss your concern informally with the relevant member of staff or student involved (Phase 1). This does not apply to complaints of sexual misconduct.

The information in this complaint form will be used by the College in accordance with the Policy. Your complaint will be forwarded to a Responsible Officer for resolution. If your complaint involves possible criminal conduct the matter may be referred to the Police.

The making of a complaint is voluntary. You are asked to provide all the information required in this form; if you do not, the College may not be able to fully consider or resolve your complaint.

You have the right to access and correct personal information about you held by the College. If you have any questions or concerns about the student complaints process or wish to update your details, please contact taylorsstudenthelp@navitas.com

Student Complaints Lodgement

Please note:

1. Ensure you have all the relevant information and documentation ready before you submit this form.
2. Please complete the form in full; incomplete forms may not be processed.
3. Please submit this form to taylorsstudenthelp@navitas.com
4. After the complaint is submitted, you will receive an email acknowledgement with your case number within five working days.
5. The Responsible Officer will assess the nature of your complaint and contact you with the outcome within ten working days from the acknowledgement date. Where this timeframe is not possible, you will be updated and provided with an expected timeframe for resolution.
6. If you are unsatisfied with the outcome, you have five working days to complete a *Student Internal Appeals Form (Phase 3)*.

SECTION A: YOUR DETAILS

Name:	Student Identification Number (ID):
Preferred name:	College email address:
Course:	

If someone is filling in and/or submitting the complaint form on your behalf, please include their details.

Someone is helping me with this complaint: <input type="checkbox"/> Yes <input type="checkbox"/> No (go to SECTION B)	
Name:	Mobile number:

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Relationship to you: <input type="checkbox"/> Staff member <input checked="" type="checkbox"/> Relative <input type="checkbox"/> Friend <input type="checkbox"/> Other, please specify: _____
What are they helping you with? <input type="checkbox"/> Filling in the form <input type="checkbox"/> Submitting the form on your behalf

SECTION B: COMPLAINTS INFORMATION

Did you make an informal complaint (Phase 1) before completing this formal complaint form (Phase 2)?

Yes, name of staff member to whom you made the informal complaint: _____ No

Please select the category that best represents your complaint. If your complaint includes more than one, you can select more than one category. Different complaints instances should be lodged as separate complaints to allow appropriate and prioritised processing.

Type:

- | | | |
|---|--|---|
| <input type="checkbox"/> Assault (including sexual) ^ | <input type="checkbox"/> Drugs / alcohol related | <input type="checkbox"/> Stalking |
| <input type="checkbox"/> Breach of privacy | <input type="checkbox"/> Fee-related | <input type="checkbox"/> Stealing |
| <input type="checkbox"/> Bullying ^ | <input type="checkbox"/> Fine | <input type="checkbox"/> Teaching quality |
| <input type="checkbox"/> Campus facilities | <input type="checkbox"/> Harassment | <input type="checkbox"/> Threats^ |
| <input type="checkbox"/> Discrimination | <input type="checkbox"/> Staff conduct | <input type="checkbox"/> Unfair treatment |
| <input type="checkbox"/> Other, please specify: _____ | | |

^If you feel that your life is in danger, please report to the Police immediately on 000.

Date of event:

___ / ___ / _____ Unspecified

‘Individual’ or ‘Service’

Please provide any information you have about the individual(s) or service you are complaining about. You can provide a description if needed or mark unknown if you are not sure.

Type:	<input type="checkbox"/> Student	<input type="checkbox"/> Staff	<input type="checkbox"/> Service or facilities	<input type="checkbox"/> Unknown
Name (if known):				

Witness information (if known and relevant)

Where relevant, include details of anyone who saw the incident or can support your complaint. In some instances, this information can help us reach a faster outcome.

Witness name:	
Witness type:	<input type="checkbox"/> Student <input type="checkbox"/> Staff <input type="checkbox"/> Public
Consent:	<input type="checkbox"/> I give the Responsible Officer consent to contact the witness and share information I have provided on this complaint with the witness as part of the investigation.

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Complaint details:

Please provide a short description of your complaint. You can submit additional information as per SECTION C. You may include any attempt you have made to resolve the issue (including the name of any student or College staff member you spoke with).

Complaint preferred outcome:

Please include a short description on the preferred outcome you are seeking with this complaint.

SECTION C: DOCUMENTATION

Please attach any additional and/or supporting information to your complaint. Information could include, but is not limited to:

- Any Medical Certificates / Reports
- Your most recent Academic Reports
- Any supporting photos, images, screenshots

Declaration

- I have read and understood the Student Complaints and Appeals Policy and Procedures 2021.
- I acknowledge that the information and documentation provided by me as part of this complaint is accurate and true.
- I understand that in making this complaint the information I provide will be treated with appropriate confidentiality in accordance with Australian privacy legislation and will not be disclosed to a third party except as set out in the Student Privacy Policy 2021.

Signature: _____ Date: _____

Office use only	
Date received:	Complaint reference number:
<input type="checkbox"/> Acknowledgement sent	<input type="checkbox"/> Outcome sent

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