Complaints and Grievance Form

1. Complainant Details

Full Name	
Student ID (if applicable)	
Contact Number	
Email Address	

2. Complaint / Grievance Details

Date of Incident or Issue	
Location of Incident	

3. Type of Complaint (tick all that apply)

☐ Academic Issues (assessment, training quality)
☐ Administrative Issues (enrolment, fees, records)
☐ Staff Conduct or Behaviour
☐ Discrimination or Harassment
☐ Access to Services or Facilities
☐ Other (please specify): _____

4. Details of Complaint / Grievance

Please provide a clear and detailed description of your complaint or grievance, including dates, persons involved, and any previous action taken.

5. Desired Outcome

Please describe what you would like to see happen to resolve this issue.

6. Supporting Documentation

Have you attached any supporting documents?	☐ **Yes** ☐ **No**
If yes, please list them	

7. Complainant Declaration

☐ I declare that the information provided is true and accurate to the best of my knowledge.

☐ I understand that my complaint will be handled confidentially and fairly in accordance with ALIT's Complaints and Appeals Policy.

Signature: _____

Date: _____

8. Office Use Only

Date Received	
Received By	
Reference Number	
Action Taken / Outcome	
Follow-up Date	
Staff Member Name & Signature	