# Complaints Form

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| --- | --- |
| First name |  |
| Surname |  |
| Email |  |
| Contact number |  |
| Please select the category that best describes your role in this complaint | Learner [ ]  Partner [ ]  A parent [ ] Other (please specify):  |
| What does your complaint relate to? | My apprenticeship [ ] My training course [ ] Business consultancy project [ ] Online learning [ ] Other (please specify): |
| Are any reasonable adjustments required? | [ ]  Yes [ ]  No [ ] If yes, please specify details:  |
| Please provide details of your complaint below  |
|  |
| Please provide / attach any supporting evidence you feel is necessary |
|  |
| What actions have you taken, if any, to try and resolve your complaint? |
|  |
| Please advise how you would like us to respond to your complaint? | By phone [ ] By email [ ]  |
| How would you like us to resolve your complaint? |
|  |
| I confirm I have read the Complaints Policy and am aware of the associated timescales | Yes [ ]  No [ ]  |
| Signed |  |
| Date (DD/MM/YYYY) |  |