

STUDENT COMPLAINTS FORM



Appendix A - Stage 2 : Formal Complaint

| | |
|-------------|--|
| DATE | |
|-------------|--|

1. STUDENT DETAILS

| | | | |
|----------------------|--|-----------|--|
| First name | | | |
| Surname | | | |
| Date of Birth | | ID | |
| Course | | | |
| Email | | | |

2. IMPORTANT INFORMATION

It is essential that you consult the Student Complaints Policy before completing this form, as it contains important information about the college will handle your complaint and the relevant timescales. There are 3 stages under the procedure :

- Stage 1 – Informal Resolution
- Stage 2 – Formal investigation by the Registrar
- Stage 3 – Appeal

This form should be used for making a stage 2 complaint and should be submitted to the Registrar at the following address :

The Registrar
East End Computing & Business College
149, Commercial Road,
Whitechapel
London E1 1PX

Please note that for reasons of fairness, the college is unable to consider anonymous complaints. If your complaints list another member of the college, they will normally have the right to know the complaint made about them in order to respond.

3. IMPORTANT INFORMATION

Please summarise in no more than 50 words, the nature of your complaint. You will be asked to provide more detailed information later in this form, but this summary will enable us to understand the most important elements from your point of view.

4. CAUSING FACTORS

Please specify which factors you believe to be the cause of your complaint.

| | | | |
|-------------------------------|--------------------------|---|--------------------------|
| General Cleaning | <input type="checkbox"/> | Classroom | <input type="checkbox"/> |
| Vending Machine | <input type="checkbox"/> | Internet/wifi | <input type="checkbox"/> |
| Discrimination | <input type="checkbox"/> | Action of one or more college member | <input type="checkbox"/> |
| Harassment | <input type="checkbox"/> | Special Needs | <input type="checkbox"/> |
| Bullying | <input type="checkbox"/> | Website /Moodle/TurnitIN | <input type="checkbox"/> |
| Security | <input type="checkbox"/> | Teacher / Lecturer | <input type="checkbox"/> |
| Hazards | <input type="checkbox"/> | Quality of Teaching | <input type="checkbox"/> |
| Health & Safety | <input type="checkbox"/> | Printing | <input type="checkbox"/> |
| Support of the college | <input type="checkbox"/> | Others | <input type="checkbox"/> |

Please specify

5. YOUR COMPLAINT

Please set out the main points of your complaint below. If you need more space, continue on a separate sheet of paper, which should be securely attached to this form, and clearly marked with your name and student number

6. SUPPORTING EVIDENCE

Please list below any piece of documentary evidence you wish to submit with this form. You may also list the names of witnesses who may support you for this complaint.

7. PREVIOUS ACTIONS

Briefly explain what steps have you taken to resolve your complaint and why you were dissatisfied with the conclusion at Stage One.

8. DESIRED OUTCOME

Briefly explain what are your suggestions to improve or would you consider being a satisfactory resolution to your complaint.

9. DECLARATION

I have read and understood the College's B6 Student Complaint Procedure.

All information and documentation provided in/with this form is complete and represents an accurate and true reflection of the situation that led to my complaint.

I agree that my complaint may be disclosed to relevant members of the College to the extent necessary for any investigation.

I authorise the investigating team to consider this form and any relevant information held by the College to the extent necessary for the consideration of my complaint.

I give permission for the college to seek verification of the authenticity of any statements or evidence provided with this complaint.

| | | | |
|-----------------------------|--|-------------|--|
| Name of student | | | |
| Signature of Student | | Date | |

ECBC USE ONLY

Registrar, Please insert your comments or suggestion so far

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

| | | | |
|-------------------|--|-------------|--|
| Staff Name | | | |
| Signature | | Date | |

DECISION (Admin Manager / Principal / Panel)

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Name

Signature

Date

FEEDBACKS TO STUDENT

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Name of Student

Signature

Date