Formal Complaints

Complaint Form

Please complete and return to the Headteacher / CEO of the Trust as appropriate.

|  |
| --- |
| Your name: |
| Pupil’s name (if relevant):  |
| Your relationship to the pupil (if relevant): |
| Address:Postcode:Day time telephone number:Evening telephone number:Email address: |
| Please give details of your complaint, including whether you have spoken to anybody about it. |
| What actions do you feel might resolve the probable at this safe? |
| Are you attaching any paperwork? If so, please give details. |
| Signature:Date: |
| Official use |
| Date acknowledgement sent: |
| By whom: |
| Complaint referred to: |
| Action taken: |
| Date: |



Complaint Form. Formal Complaints

Please complete and return to the Headteacher / CEO of the Trust as appropriate. Your name:

Pupil’s name (if relevant):
Your relationship to the pupil (if relevant):

Address:
Postcode:
Day time telephone number: Evening telephone number: Email address:

Please give details of your complaint, including whether you have spoken to anybody about it.

10



What actions do you feel might resolve the problem at this stage?



THE TWO COUNTIES TRUST Ambition | Teamwork | Honesty

