

Complaints and Appeals Form

Student to complete and submit to the student services (reception).

APPLICANT INFORMATION

Student Name: _____ Student ID: _____

Address: _____

Telephone: _____ Email: _____

Date of incident: _____ Course: _____

Type of incident: Complaint Appeal Assessment Appeal

Did you receive a notice of intention to report to Department of Home Affairs (DHA) from Axis Institute?

YES NO Please attach a copy of the letter.

DETAILS OF COMPLAINT/APPEAL/ASSESSMENT APPEAL

* Please attach a separate page if the space above is not sufficient to write the details of the Complaint/Appeals/Assessment Appeals

Did you speak with your trainer to resolve the complaint? YES NO

Did you speak with student services to resolve the complaint? YES NO

Student Signature: _____ Date: ____ / ____ / ____

Note:

All complaints will be taken seriously and a written statement will be given, outlining the complaint or grievance, how it has been handled on appeal, the outcome and reasons for any decisions made. The college's grievance procedures does not limit the rights of students to take action under Australia's consumer protection laws.

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OFFICE USE ONLY

Form Received By Staff Name: _____

Form Received Date: ____ / ____ / ____

Signature Staff: _____

Student Name: _____ Student ID: _____