

We suggest you read the Student Handbook for guidance before you complete this form.

### STUDENT DETAILS

First Name	<input type="text"/>	Date Of Birth	<input type="text"/>
Middle Name	<input type="text"/>	Passport Number	<input type="text"/>
Last Name	<input type="text"/>	Visa Type	<input type="text"/>
Student ID	<input type="text"/>	E-mail	<input type="text"/>
Intake Date	<input type="text"/>	Contact Number	<input type="text"/>
Course Enrolled	<input type="text"/>		
Address	<input type="text"/>		

### COMPLAINT DETAILS

**Your Complaint:** We take your concerns seriously and want to know if processes and services being offered here at Victory Institute are not to a satisfactory standard. By completing this form you are assisting us in improving our service delivery.

We will commit to treating your issue with respect and as Private and Confidential.

The resolution process will only involve those concerned and relevant staff required to resolve the matter you have raised. Initially, your matter will be referred to the Victory Institute Administration/Academic Manager. Please outline in dot points a summary of your complaint or concern.

*Student's Signature Here.*

Date:

**OFFICE USE ONLY**

**1. Received by (Victory staff member name)**

Date

**2. Referred to Administration / Academic Manager**

Date

**3. Referred to PEO (if requested) by**

Date

*Attach outcome to this document*

**4. Referred to External Mediation (if requested) by**

Date

*Attach outcome to this document*

**RECORD OF RELEVANT PARTIES**

**RECORD OF THE OUTCOME**

**Record of outcome by**

Date

**Contacted Complaints & Informed of outcome by**

Date