X	Victory Institute of Vocational Education Pty. Ltd. T/A Victory Institute ABN 63 111 473 404 L CBICOS 02578D L BTO 91161
'	ABN 63 111 473 404 CRICOS. 02678D RTO. 91161
	Market Street Campus - Head Office: Level 8, 22 Market Street Sydney NSW 2000 Australia
	George Street Campus: Level 5, 565 George Street Sydney NSW 2000 Australia
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We suggest you read the Student Handbook for guidance before you complete this form.

STUDENT DETAILS

First Name	Date Of Birth	
Middle Name	Passport Number	
Last Name	Visa Type	
Student ID	E-mail	
Intake Date	Contact Number	
Course Enrolled		
Address		

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

Contacted Complaints & Informed of outcome by

Date

Date