

**International Student Complaints and Appeals Form**

Use this form for all student complaints or appeals.

Date raised _____

Reason(s)	TICK
Student Complaint	
Student Appeal	
Other (specify)	

Name of student _____

Section 1 - Complaint / Appeal

Complaint Provide as much detail as possible on complaint including cause	Appeal Provide as much detail as possible on appeal including grounds for appeal
Nature of complaint:	Decision being appealed:
People involved:	Stated grounds for appeal:
Dates:	Has appeal been lodged in writing? <input type="checkbox"/> Yes <input type="checkbox"/> No
Cause(s):	



Section 2 - Action to be taken

Action to be taken to address complaint:

(Note, if student wishes independent people to hear the complaint follow appeals process and complete appeals sections 2 and 3).

Who by:

By When:

After discussion, is the appeal to be pursued by the student? ☐ Yes ☐ No

If Yes, advise the PEO who will arrange a convening of independent person(s) to hear the appeal.

Has the student been advised of the Appeals process? ☐ Yes ☐ No



Section 3 Complaint or Appeal Outcome

Complaint	Appeal Detail outcomes from Appeals process
<p>Agreed action completed and complaint effectively dealt with? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If No, detail further action(s) to be taken.</p> <p>Sign off only to be done when the complaint has been fully addressed and resolved.</p> <p>Signed: _____</p> <p>PEO</p>	<p>Was the student successful in their appeal? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes, provide details of the documented changes required to reflect successful appeal.</p> <p>Changes required:</p> <p>Timeframe for changes:</p> <p>If No, or when changes have been made the appeal can then be signed off as complete.</p> <p>Signed: _____</p> <p>PEO</p>