Sydney College of Professional Education Pty Ltd | ABN: 78648109040
RTO Code: 46019 | CRICOS Code 04135H
Address: Level 1, 133 Parramatta Road, Granville, NSW 2142
Tel: 0278060845 | Email: info@scpe.edu.au
Website: www.SCPE.edu.au

COMPLAINTS FEEDBACK FORM

Please complete this Complaints and Feedback Form and submit it to the Student Administration Officer either in person or at the following email address :admin@scpe.edu.au

Name:	**Student ID no:**
Email:	Phone:
Course:	
Complaint	Reason for complaint – please tick ☐ trainer (please provide name) ☐ staff member (please provide name) ☐ Services (please specify) ☐ Other
Feedback	Details of Feedback being provided – please tick ☐ trainer (please provide name) ☐ staff member (please provide name) ☐ Services (please specify ☐ Other
Describe the nature of the complaint/ feedback	Attach any supporting evidence or documentation
Describe any efforts made to resolve the issue:	
What outcomes are you seeking or expect?	

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Are there any areas in which we can improve our systems in the future?	
By signing this form, I certify that the information provided is true and correct. **Signature:** **Date:**	

Office Use Only			
Receiving staff member:			
Date:			
Detail action taken:			
Date Student Advised of Outcome:			
Continuous Improvement Form (CIF) raised: ☐ Yes ☐ No		**Date CIF raised:**	
CIF raised by:			
Signed:			**Date:**
CIF received by the Administration Manager ☐ Yes ☐ No			**Allocated CIF no:**
Signature of the CEO:			**Date:**