**Alder Community High School Formal Complaint Form**

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| **Name** | |  |
| **Address** | |  |
| **Telephone** | |  |
| **Email Address** | |  |
| **Name of student, year group and your relationship to them (where applicable** | |  |
| **Details of complaint** | | |
|  | | |
| **Action taken so far including staff member who has dealt with it and actions or solutions offered** | | |
|  | | |
| **The reason that this was not a satisfactory outcome for you** | | |
|  | | |
| **What action would you like to be taken to resolve the situation** | | |
|  | | |
| **Signed** |  | |
| **Date** |  | |
| Office use only:  Date received:  Acknowledged:  Referred to: | | |