**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: |