

STUDENT GRIEVANCE FORM



Student Name		Student Signature	
Course Name (if applicable)	Course Location (if applicable)	Date	
Form Received on (Date)	Received by (Print & sign)		

Nature of grievance/s:

1. _____

2. _____

STUDENT – DO NOT PROCEED BELOW THIS LINE. IF YOU HAVE MORE THAN 2 GRIEVANCES ~ USE A SECOND FORM

Decision of listed grievances

I have been informed of and I accept the decision outcome in relation to the above grievances.

Student Name & Signature	RTO Representative Name & Signature