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| **Complaint Form** |
| Please complete and return to the School/Trust office in a sealed envelope marked ‘Private and Confidential’ addressed to the Headteacher, Chair of Advocates, or the Clerk to the Local Advocate Board or Governance Professional, depending on who or what the complaint is about. They will acknowledge receipt and explain what action will be taken. |
| **Your name:** |  |
| **Pupil’s name (if relevant):** |  |
| **Your relationship to the pupil (if relevant):** |  |
| **Address including postcode:** |  | **Daytime tel. no:** |  |
| **Evening tel. no:** |  |
| **Your email address:** |  |
| **Please give details of your complaint, including whether you have spoken to anybody at the school about it:** |
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| **What actions do you feel might resolve the problem at this stage?** |
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| **Are you attaching any paperwork? If so, please give details.** |
|  |
| **Signature:** |  | **Date:**  |  |

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| **For official use only:** |
| Acknowledgement sent by whom: |  |
| Method e.g. email: |  | Date: |  |
| Complaint referred to: |  | Date: |  |
| Action taken: |  |
| Action Date: |  |