# Complaint form

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| Complainant’s Contact Details | | | | | | | | | | |
| Full Name: | |  | | | | | | | | |
| Contact phone: | |  | | | | | | | | |
| Contact email: | |  | | | | | | | | |
| Complainant’s Category | | | | | | | | | | |
| Parent  Family member  Educator  Staff member  Person with management or control | | | | | | | | | | |
| Other |  | | |  |  | |  |  | |  |
| Complaint Details | | | | | | | | | | |
| Describe your complaint (include the following)   * describe the incident and/or your concerns * include key dates and times, such as when the incident occurred * if known, include the names of Departmental offices involved * details of any telephone conversations or emails * any other information that you think is relevant to your complaint. | | | | | | | | | | |
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| What action would you like to see as a result of your complaint? | | | | | | | | | | |
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| Date Submitted: | | |  | | |  | | |  | |
| If your complaint cannot be resolved at your regional office, please complete the Complaint Form and send it to [quality.assessment.regulation@education.vic.gov.au](mailto:quality.assessment.regulation@education.vic.gov.au) together with supporting documents, or telephone (03) 9651 3582. | | | | | | | | | | |