



**HIGHER EDUCATION COMMISSION HIGHER LEVEL 4/5 DEN COMPLAIN FORM
FORMAL AGE 2**

DETAILS OF COMPLAINT TO BE COMPLETED BY STUDENT

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Name:		College Student Number:
Name of Course:		Level:
Name of Subject Area:		Year of Study:
Address for correspondence in connection with the complaint		
Pos code		Telephone Number
E-mail		
Outline of complaint		
What happened?		
When did it happen?		
Who was involved?		
How was he/she student affected?		
Please explain here the steps you have taken, together with dates, or resolve or complain informally at Stage 1		

Please explain how you are dissatisfied with the response you have received at Stage 1

Please indicate below, if you perceive, that you come or further action you are expecting. The College can only consider outcomes which are reasonable and which are allowed by the College's Regulations, Policies and Procedures.	
Element of complaint	What outcomes are you hoping for?



