

# TRAINING COMPLAINTS AND APPEALS FORM

## Instructions:

A complaint or request for appeal must be made within 15 working days of the event, circumstance or decision that is the subject of the complaint or request for appeal.

Fill in all sections clearly and carefully by writing in block letters.

Information requested on this form is necessary to investigate your complaint or request for appeal.

## When complete, print this form and submit it:

By email to: [training@reiq.com.au](mailto:training@reiq.com.au)

In person to: Training Services Manager, REIQ, PO Box 3447 TINGALPA DC QLD 4173

We will provide written acknowledgement of receipt of your form has been received within two (2) calendar days of receiving it.

If you have questions about this form or you require assistance to complete it, please contact us on: 07 3249 7347 or [training@reiq.com.au](mailto:training@reiq.com.au)

## Definitions

### What is a complaint?

A complaint is an expression of dissatisfaction with a specific action or service of [RTO name] or an allegation involving the conduct of:

- REIQ, its trainers, assessors or other staff;
- a third party providing services on behalf of REIQ, its trainers, assessors or other staff; or
- a student of REIQ.

### What is an appeal?

An appeal is a request for a review of decisions made by REIQ (or a third party providing services on the RTO's behalf), including decisions about assessment.

## What you want to do

☐ Make a complaint ☐ Request an appeal

## Your details

☐ Mr ☐ Mrs ☐ Ms ☐ Miss

Surname

First name

Home phone

Mobile

Email

## Details of complaint or appeal

Date of the event, circumstance or decision that is the subject of the complaint or request for appeal:

## Complaints and appeals form

Please describe the details of the complaint or appeal (you may attach supporting documentation if required)

Have you taken any steps to resolve this issue? If yes please provide details:

What outcome would you like to see from raising this complaint/appeal?

### Declaration

☐ I declare that the information provided in this form is, to the best of my knowledge, true and correct. I acknowledge that REIQ may use the information by me to investigate the complaint. I understand that this information may also be used for the continuous improvement of the RTO's operations.

Name

Signature

Date

# Complaints and appeals form

## Office use only

☐ Form checked for completeness Date  Initials

☐ Acknowledged in writing (within two business days of receipt) Date  Initials

Resolution and advice due by (add 30 calendar days) Date

☐ Details of investigation - include details of dates, party/ies, discussions and documentation reviewed: Date  Initials

☐ Decided that more than 60 days required - reasons: Date  Initials

☐ Complainant/appellant advised of delay and reasons Date  Initials

☐ Progress update provided to complainant/appellant Date  Initials

☐ Progress update provided to complainant/appellant Date  Initials

☐ Progress update provided to complainant/appellant Date  Initials

☐ Progress update provided to complainant/appellant Date  Initials

☐ Outcome reached - details of outcome and any action required: Date  Initials

Outcome:

# Complaints and appeals policy and procedure

Office use only

Reasons for outcome:

Required action:

<input type="checkbox"/> Decided that more than 60 days required - reasons:	Date	<input type="text"/>	Initials	<input type="text"/>
<input type="checkbox"/> Complainant/appellant advised of delay and reasons	Date	<input type="text"/>	Initials	<input type="text"/>
<input type="checkbox"/> Continuous improvement register updated with future opportunities to be considered raised in the investigation of this complaint/appeal (if applicable)	Date	<input type="text"/>	Initials	<input type="text"/>