

Complaint Form

Please complete and return to the headteacher (either headteacher / complaints coordinator / designated governor – school to delete as appropriate) who will acknowledge receipt and explain what action will be taken.

Your name:	
Pupil's name (if relevant):	
Your relationship to the pupil (if relev	ant):
Address:	
Postcode:	
Day time telephone number: Evening telephone number:	
Email address:	

Please give details of your complaint, including whether you have spoken to anybody at the school about it:
What actions do you feel might resolve the problem at this stage?

Are you attaching any paperwork? If so, please give details.	
Signature:	
Date:	
Official use	
Date acknowledgement sent:	
By who:	
Complaint referred to:	
Date:	