



Affordable Industry Training Complaints Application

Date: ____/____/____

Student's Name _____

Contact Number _____

Address _____ Suburb _____

Post Code _____ State _____

Email _____

Course _____

Trainer _____

Please provide evidence and information on complaint

Date of event: _____ Location of event: _____

Who was involved (please describe them if name is unknown)? :

Explain the complaint in detail:

Explain the complaint in detail continued: (please attach separate paper if you need more room)

How do you think the complaint could be resolved? :

Print your name and sign

Name _____

Signed:.....

Date: ___ / ___ / ___

Office Use Only

Date Complaint received: _____ Taken by: _____

Complaint resolved: _____

Outcome: _____