**Complaints Form**

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| **Your name:** |
| **Students’ name:** |
| **Your relationship to student:** |
| **Your address and postcode:**  |
| **Your daytime telephone number:** |
| **Your evening telephone number:** |
| **Your email address:** |
| **Your complaint is:** (if you have more than one complaint, please number these) |
| What action have you already taken to try and resolve your complaint(s) in accordance with Stage 1 of the academy’s complaints procedure?(Who did you speak to and what was the response?) |
| What would you like as an outcome from your complaint(s)? |
| Are you attaching any paperwork? If so, give details here: |

Your signature……………………………………………………… Date …………………

All functions of the Complaints Procedure must adhere to the requirements of the Data Protection Act 2018 and the Freedom of Information Act 2000.

Please complete and return to the academy office in a sealed envelope addressed to the Headteacher/Head of School, Clerk of the Local Governing body or Clerk of the Directors (as appropriate).

***Office use***

Date received …………………………………………………………

Date acknowledgement sent …………………………………………………………

Responsible member of staff …………………………………………………………