Greenhill Primary School Complaint Form

Please complete and return this form to the Chair of the Complaints Committee who will acknowledge receipt and explain what action will be taken.

Your name:

Relationship with the School (e.g. Parent, neighbour):

Address:

Telephone (Daytime):
(Evening):

E-mail:

Your child's name (if relevant to your complaint):
Year group:

Please give concise details of your complaint, (including dates, names of witnesses etc.) to allow the matter to be fully investigated:

You may continue on separate paper or attach documents, if you wish.
Number of additional pages =

What action, if any, have you already taken to try and resolve your complaint? (i.e. who have you spoken with or written to and what was the outcome?)

What actions do you feel might resolve the problem at this stage?

Signature.

Date.

School Use only:	
Date form received:	
Received by:	
Date acknowledgement sent:	
Acknowledgement sent by :	
Complaint referred to:	
Date:	