Victorian Chamber of Commerce and Industry (RTO 4166)

Complaints and Appeals Application Form

Full name	
Mobile	
Email address	
Course	
You are	☐ Making a complaint ☐ Appealing an assessment result ☐ Appealing a complaint decision
To help us better understand the matter please identify the principle nature of the complaint	☐ Course Materials ☐ Trainer/assessor ☐ Quality of training provided ☐ Other training participants ☐ Other Victorian Chamber staff ☐ Privacy/confidentiality ☐ Other
Please provide a detailed explanation of the complaint/ assessment appeal/ decision appeal including information on • **The name/s and positions of person/s involved (include the name of any witnesses)** • **Date and time of event** • **Details of any action you have already taken in regard to this event** • **Details of the outcome you are seeking** *Attach extra sheets as required and copies of any documents relating to your complaint/appeal*	

Privacy Notice

The information provided on this form will be used to follow up your complaint. For details of the Privacy Policy visit Privacy policy | Victorian Chamber of Commerce and Industry

Student declaration

I declare that the information provided is true and correct and I understand that providing false or malicious claims is against the law and may have serious consequences

Signature	
Date	