

## COMPLAINT / GRIEVANCE & ASSESSMENT APPEAL FORM

### Details

<b>Surname:</b>		<b>Title:</b>	
<b>Given Name:</b>			
<b>Address</b>			
<b>Contact Number</b>			
<b>Date of Incident</b>			
<b>Date of Lodgement</b>			

### Nature of Lodgement

I wish to Lodge a	Complaint/Grievance <input type="checkbox"/> (Completed Sections 1 and 3 along with the Declaration)	Assessment Appeal <input type="checkbox"/> (Completed Sections 2 and 3 along with the Declaration)
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### Section 1 – Complaint/Grievance

**Details of the Complaint/Grievance** (Supporting documentation may be attached)

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**Section 2 – Assessment Appeal**

Course Title:

Trainer / Assessor:

Date of Occurrence:

Reason for your Submission:

**Section 3**

Occurrences leading up to this submission:

What steps have you taken to resolve

What outcomes are you seeking or expect:

What improvements to our system could be implemented to avoid this situation in the future:

**Declaration**

By signing this form, I certify that the information provided is true and correct

Signature

Completed forms are to be submitted to the relevant person aligned to the state of the person submitting the form.

DETAILS	NSW	WA
Training Manager	Michael Murray	Simon Pfitzner
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Site Address	1 WesTrac Drive Tomago, NSW 2322	142 Great Eastern Highway South Guildford, WA 6055
Postal Address	Locked Bag 2006 Raymond Terrace NSW 2324	Locked Bag 9 Midland DC WA 6936
Phone	02 4964 5203	08 9377 9775

**Office Use Only**

Lodgement Received

Date:

Acknowledge of Lodgement Sent

Date:

Register Updated

Date:

Number:

Details of Investigation Undertaken

Date/s:

Summary of Outcome

Date:

Outcome Communicated

Date: