

FEEDBACK, COMPLAINTS AND APPEALS FORM

Personal Details	
Full Name:	
Position of Complainant/Appellant:	
USI No.:	
Phone No.:	
Email:	
Address:	
If the complainant is a student, please provide the following details	
Student ID:	
Course Name:	
Date:	
Type of Submission: Please indicate the type of submission ☐ Feedback ☐ Complaint ☐ Appeal	
Feedback/Complaint/Appeal details	
Feedback / Complaint Details Date the issue occurred: _____ Reason for submission (tick all applicable): ☐ General Operations ☐ Assessment ☐ ESOS related complaint ☐ Discipline/misconduct ☐ Outcome of application/request ☐ Other, please specify Have you complained about the issue before? ☐ Yes ☐ No If yes, please give the date, the complaint was lodged: _____	Appeals Details Date to which this appeal refers to: _____ Reason for the appeal: ☐ Assessment outcome ☐ Discipline/misconduct ☐ Any outcome of any application for request ☐ Any disciplinary action taken against you. ☐ Other (please specify below)

Summary of Feedback / Complaint / Appeal (Please give detailed explanation and attach any supporting evidence) (Provide an explanation on how you believe this complaint can be resolved)	
Declaration:	
☐ I declare that all the information provided in this form is correct and accurate to the best of my knowledge. ☐ I am willing to participate in meetings or discussions to help resolve this matter. ☐ I understand that if I am dissatisfied with the decision after the internal appeal outcome, I can seek assistance from external complaints handling body i.e., Overseas Student Ombudsman (OSO) www.ombudsman.gov.au which is free of cost. Signature: _____ Date: _____	
*Office use: (*marked items to be filled up by staff or compliant handling party)	
*Receiving staff member:	
*Date Received:	
*Method of Lodgment:	☐ Email ☐ Mail ☐ In-person
*Name(s) of Staff Reviewing the Case:	
*Actions proposed by the panel/ determined resolution:	
*Implementation of proposed action by:	☐ Continuous Improvement Request ☐ Counselling by the relevant persons ☐ Change of any service or member ☐ External counselling agency ☐ Referred to:

	☐ Other (Please specify)
Date of Resolution:	XX/XX/XXXX
*Outcome:	☐ Successful ☐ Unsuccessful
*Method to communicate the outcome with the complainant/appellant:	☐ Email ☐ Mail
*Response of complainant/appellant:	☐ Agrees and accepts the decision made by the panel (The student signs the acceptance, and the record is placed in student's admin file) ☐ Disagrees and unhappy (RBA will contact the student to help him/her to access services of Overseas Student Ombudsman)
Declaration by complainant/appellant (Please read and tick before signing it): ☐ I acknowledge that the outcome of the feedback/complaint/appeal lodged by me have been informed to me. ☐ I agree with the decision made by the panel, and I am happy to accept it. OR ☐ I disagree with the decision made by the panel and would like to escalate it to an external body, and I have been advised of all the required information in this regard. Signature: _____ Date: _____ RBA's representative Name: _____ Signature: _____ Date: _____	