



STRICTLY CONFIDENTIAL

INTERNATIONAL STUDENT PROGRAM

**COMPLAINTS AND GRIEVANCES
REQUEST FOR APPEAL APPLICATION FORM**

In accordance with the Student Complaints and Grievances Procedure for a Formal Appeal, this document is to be completed and forwarded to the Principal.

1. PERSON SEEKING FORMAL REVIEW:

Student' s name: _____

Contact telephone: _____

2. OTHER PARTY

Name: _____ **Position: (if appl.)** _____

2.1 WITNESS DETAILS (if relevant)

Name and contact details: _____

Name and contact details: _____

Name and contact details: _____

2.2 TYPE OF GRIEVANCE

Describe the grievance briefly in a few words.

- Date and details of the decision/action/inaction that you are requesting reviewed.
- Why you are aggrieved by the decision/action/inaction.

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2.3 ACTIONS TAKEN

What other actions have been taken and why these were unsuccessful in resolving the issue.

Briefly describe actions taken and why the review is requested:

Student's name : _____

Student's signature: _____

Date: _____

Please forward under confidential cover to the Principal

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**COMPLAINT AND GRIEVANCE
FORMAL REQUEST FOR APPEAL**

REPORT FORM

To be completed by the Principal (or nominee)

1. Who was involved in resolving the appeal process?

2. Has the complaint been resolved? YES / NO

3. Briefly describe actions taken to resolve the complaint/grievance.

4. Briefly describe the outcome of the Formal Appeal.

Complainant's name: _____

Complainant's signature: _____

Principal's signature (or nominee): _____

Date: _____