

Complaint Form for Initial Point of Contact



Complainant contact details

Name:

Address:

Telephone:

Email:

Complainant category

Parent/guardian/carer

Staff member

Family member/relative

Student

Other

Complaint details

Name of school:

Type of complaint:

Brief description of the issue:

Has the complainant attempted to resolve the issue at the school?

Confirm if the matter is to be lodged as a complaint:

Refer the complainant to the MACS website www.macs.vic.edu.au/Contact-Us/Complaints.aspx (if appropriate) where parents/guardians/carers can lodge a complaint via RESOLVE **OR** advise the complainant that the matter will be referred to the relevant Regional General Manager.

Action:

Referral to MACS website ([Contact Us/Complaints](http://www.macs.vic.edu.au/Contact-Us/Complaints.aspx)) to lodge complaint online via RESOLVE

Referral to Regional General Manager

Other _____

Name of staff member:

Date:
