

## Australian College of Culinary and Management (ACCM)

RTO -45886-CRICOS-04038J

## **Complaints and Appeals Form**

Personal Details		
Full Name:		
Position of Complainant/Appellant:		
Phone No:		
Email:		
Address:		
If the complainant is student, please provide the following details		
Student ID:		
Course Name:		
Complaint/Appeal Summary (Please give detailed explanation of complaint/appeal and attach any supporting evidence)		
	Declaration	
Declaration		
<ul><li>(Please tick before you sign)</li><li>All the information provided in this form is correct and accurate to the best of my knowledge.</li><li>I am happy to attend any meeting with relevant persons required to resolve the issue.</li></ul>		
Name		
Signature:	Date:	
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Complaints and Appeals Form			
Office Use Only			
Complaint/Appeal Receiving staff member:			
Date:			
Method of lodgment	Email	in person	
Name of members in panel for resolving the issue			
Actions proposed by panel			
Implementation of Proposed action by:	Continuous improvement Request.		
	Counselling by the relevant persons.		
	Change of any service or member.		
	External Counselling agency		
	Other (Please specify)		
Outcome	Successful	Unsuccessful	
Response of complainant/appellant	<ul> <li>Agrees and accepts the decision done by panel (The student signs the acceptance, and the record is placed in student's admin file)</li> <li>Disagrees and unhappy (Student Support Officer will contact student to help student to access services of Overseas Student Ombudsman)</li> </ul>		
Declaration by complainant/Appellant			
(Please tick before you sign):			
<ul> <li>I acknowledge that I have been communicated the outcome of the complaint/appeal lodged by me.</li> <li>I agree to the decision made by the panel and happy to accept it.</li> <li>I disagree to 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.</li> <li>I have visited- <u>https://www.accm.vic.edu.au/_files/ugd/6ba6c0_aff88633c96e4ee5ba4b50db14af77e1.pdf</u></li> </ul>			
Email: accm.vic.au@gmail.com			
Signature:	Date:		
Print Name:	_		
Signature of ACCM Staff	Date:		
Print Name:			
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