

## **Complaint and Appeal Form**

Your Details						
Date		Student ID		Course		
Your Name				-		
Contact Details	Address					
	Email					
	Phone					
Please indicate which of the following applies to you  Student Workplace or Employer  Please indicate if you are lodging a complaint, appeal or an assessment appeal.  Complaint Appeal (unrelated to assessment) Assessment Appeal						
Please outline the reasons for your complaint or appeal in as much detail as possible. You may attach additional pages and supporting information as needed.						



## **Complaint and Appeal Form**

For complaints and appeals not related to assessment, please complete the following.

2. Please make any suggestions you have to resolve this issue.				
2 Are there particula	r staff members of Melhourne Institute of Australia who may need be involved in the			
3. Are there particular staff members of Melbourne Institute of Australia who may need be involved in the investigation of this complaint or appeal and in what way?				
For assessment appeals, please complete the following.				
4. Which unit and/or task is this appeal in relation to?				
Student Signature				
Printed Name				
Date				

Please submit this form to Student Services Officer in campus or email to studentservices@mia.edu.au