



# School Community Grievance Lodgement Form

Before lodging a formal grievance students, parents, guardians and carers are requested to read carefully the *Grievance Policy and School Community Grievance Procedure*.

A grievance will not be formally investigated until all efforts by the aggrieved student, parent or guardian to resolve the grievance through informal processes have been exhausted.

**Completed grievance lodgement forms are to be sent via email to the Deputy Principal or in a sealed envelope marked:**

**CONFIDENTIAL**  
**C/O Deputy Principal**  
**PO Box 423, Hamilton, VIC, 3300**

Please note, the contents of this form (which describes the grievance, steps taken to resolve the grievance, and the desired outcome) will be distributed to the other parties to the grievance. Personal information provided at the beginning of this form (excluding your name) is for administration purposes only and will be kept confidential.

Title:	Surname:	Given Name:	
Address:			
Telephone No:			
Email Address:			
<b>Grievance Details</b>			
<b>Describe your grievance (including the parties to the grievance):</b> <i>(attach extra pages if necessary)</i>			
Have you tried to resolve the complaint informally?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
<b>If yes, Describe what you have done to resolve the grievance:</b>			

**If no,  
Explain why you have not tried to resolve the complaint informally:**

**What is your desired outcome which you believe would settle the grievance?  
(attach extra pages if necessary)**

**Declaration**

By lodging this form, I certify that:

- I believe the information I have provided on this form and in the attachments to the form is true, accurately represents the facts and includes all information relevant to my grievance. I understand that the failure to provide accurate, honest and relevant information may be an offence.
- I understand that the investigation of my grievance may require me to provide further information, answer questions and make myself available to attend a meeting/s.
- I understand that the investigation of my grievance may be terminated if I do not treat others with courtesy and respect, or I engage in behaviour that places health or safety at serious risk or substantially impacts the school's resources, or I do not cooperate with the review of my grievance, including by providing relevant information.

*Full Name*

*Signature*

*Date*

**Privacy Statement:** The information on this form is collected for the primary purpose of investigating your grievance. Other purposes of collection include recording your student declaration, attending to academic and administrative matters and statistical analyses. You have a right to access personal information that the School holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the School.

**Office Use Only**

*Date complaint received*

*by Staff Member Name*