

LEARNER FORMAL COMPLAINT FORM

LEARNER INFORMATION

Name:				Identificatior Number:		
Mailing Ac	ddress:					
Contact Number: Email Address:						
Contact Number:			Email Address.			
Please use this form to submit a formal complaint to the organization. It is intended to help you define what the problem is and tell us what you have done to try and resolve it.						
After you submit this form, we will acknowledge this in writing within 7 working days. Your complaint will be referred to the relevant department within the organization. A record of all actions will be kept. All complaints will be resolved and a written response provided within 21 working days. If resolution is not possible within this timescale, SSTC will advise you in writing of the reason for the delay and the expected date of resolution. Should you feel not satisfied with the way the organization has dealt with the complaint, you may contact NEBOSH at info@nebosh.org.uk						
The information you provide to us will be treated confidentially. It will not be disclosed to a						
third party other than to comply with the law or for managing your complaint. The details of						
your complaint (including your identity) may be shared with a person you are complaining about or potential witnesses.						
COMPLAINT						
Complaint being filed against:						
· · · ·						
	Staff					

	Staff					
	Others (please specify:)					
Name:						
Department:						
Date/Time/Place of incident/complaint:						
State f	ormal complaint (provide factual description of the complaint):					

"LEARN ONLY FROM THE BEST BECOME THE BEST"



Describe the incident or concern (give a timeline of events leading up to the incident, list the persons involved and identify witness if appropriate):

How have you attempted to resolve this situation? (List your actions to date. Who have you spoken to? State why you have not been able to resolve the matter informally):

What specific actions or suggestions do you have for resolving this concern/incident/complaint?

Your Agreement:

In submitting this complaint, I agreed that:

I have written a clear and concise outline of the complaint and the resolution I seek and attached all relevant evidence.

The information I have provided in this document is a true reflection of my experience and is not made for frivolous or vexatious purposes.

I understand that complaints that are found to be intentionally misleading or made for the purposes of causing harm may result in misconduct proceedings.

l will c	onduct myself	appropriately,	showing	courtesy	and	respect	when	dealing	with \$	SSTC staf	f.

Your Signature:		Date:					
Where to send your completed complaintBy email:info@ssafetytraining.comBy mail:7 Temasek Boulevard #12-07 Suntec Tower One Singapore 038987							

Official Use Only:

Date complaint received:

Complaint Number:

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🔀 admin@ssafetytraing.com 🛛 🔀 sales@ssafetytraining.com