



Complaint Form

Please complete and return to the school office, marked CONFIDENTIAL, for the attention of the headteacher, or the clerk to the governors if the complaint is about the headteacher or governor/s, who will acknowledge receipt and explain what action will be taken.

Your name:
Pupil's name (if relevant):
Your relationship to the pupil (if relevant):
Address:
Postcode:
Day time telephone number:
Evening telephone number:
Please give details of your complaint, including whether you have spoken to anybody at the school about it.

What actions do you feel might resolve the problem at this stage?

Are you attaching any paperwork? If so, please give details.

Signature:
Date:
Official use
Date acknowledgement sent:
By who:
Complaint referred to:
Date: