

Grievance and Outcome Appeals Form

Please refer to your Student Handbook for the policy / procedure in relation to lodging a grievance and / or outcome appeal to ensure there are grounds for the grievance / appeal and the correct process is followed.
There are no associated fees when making a complaint.

In accordance with KARBEN Training Solutions' Access and Equity policy please ensure any formal grievances and/or outcome appeals are recorded on the below listed form and handed to your trainer or submitted via fax to our office on (02) 4355 4619.

Please remember to be as accurate and specific as possible when recording the event in order for us to investigate accordingly.

Participant Name		Date form completed	
Participant Address			
Contact No.		Employer (if applicable)	
Course Code		Course Name	
Start Date		Completion Date	
Trainer/Assessor			

Please complete the following details to lodge a **Competency Outcome Appeal**:

All details must be completed in order for your appeal to be reviewed; you may also be asked to provide further details after submission of this form if required.

Qualification			
Unit Code	Unit Name		
Date submitted		Date feedback received	
Details to support appeal	<div style="border: 1px dotted black; min-height: 300px;"></div>		
Participant Signature			Date

Grievance and Outcome Appeals Form

Please complete the following details to lodge a **grievance / complaint**:

All details must be completed in order for your appeal to be reviewed; you may also be asked to provide further details after submission of this form if required.

Names of people involved in the Grievance		
Date of incident		Time of incident	
Reason for grievance being lodged (please be accurate and specific with all details)		
What action was taken to correct the problem at the time of the incident?		
Name		Signature	

<i>Office use only</i>			
Date Received		Time Received	
		Via (fax / email / post / in person)	
Name of KTS representative responsible for handling Grievance/Appeal			
Action Taken		
Recommendations		
Follow up required	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes; by whom	
Date of resolution		Client notified of outcome	