

Appendix B - Complaint Form

Please complete and return to the Clerk of the Local Academy Board or Clerk of the Trust Board, (trust@concordiamat.co.uk) who will acknowledge receipt and explain the complaints process.

What action, if any, have you already taken to try to resolve your complaint? (Who did you speak to and what was their response?)

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 whom:
Complaint referred to:
Date: