****

|  |
| --- |
| **OFFICE USE ONLY:**  **DATE RECEIVED** |

**COMPLAINTS PROCEDURE FOR STUDENTS**

**STUDENT COMPLAINT FORM**

**Cambridge Academy of Dental Implantology**

**LEVEL 2 – FORMAL STAGE**

This form is to be completed under Level 2 – Formal Stage and should be sent to the Academic Registrar or nominee by email to info@CAofDI.com. Advice on the Complaints procedure and completion of the Complaint form can be obtained from the NTSU Information and Advice Service: <http://www.trentstudents.org/ias>

# PLEASE TYPE OR COMPLETE IN BLOCK CAPITALS

This form MUST BE FULLY COMPLETED and submitted WITH SUPPORTING EVIDENCE. Failure to do so may result in a delay to your complaint.

**To assist the investigation, please attach a copy of your Level 1 Complaint Form and a copy of the written outcome received from the relevant School/Professional Service.**

**PERSONAL DETAILS**

FULL NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COURSE TITLE AND YEAR OF STUDY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address for correspondence in connection with the complaint (in the case of a Group Complaint, please attach a list of complainants on a separate sheet of paper and include their full names, student IDs, course title(s) and year of study):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Level 1 – Local Level details**

Date received Level 1 written outcome:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School or Department the complaint relates to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the person who responded to your complaint:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Outline of complaint, including dates of actions (please use additional sheets if necessary):

|  |
| --- |
|  |

Which aspect of the Student Charter do you consider has not been fulfilled, and why?

|  |
| --- |
|  |

Please explain why you are unsatisfied with the response you have received from the School or Service Department at Level 1 of the Student Complaints Procedure:

|  |
| --- |
|  |

As part of the investigation of your complaint, any member of staff mentioned will be made aware of the complaint, as will the Dean of School/Head of Service involved.

Please indicate, without prejudice, what outcome or further action you are expecting:

|  |
| --- |
|  |

**If you have written a formal letter of complaint to anyone else in the University please indicate names and / or let us know whether you intend to copy this to anyone else.**

**Declaration**

I declare that the information given in this form is true, and that I would be willing to answer further questions relating to it if necessary.

I consent to this information being made available in confidence to those appropriate to the progression and investigation of my complaint.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_