Complaints & Appeals Feedback Form

This form is intended for current or former students who wish to submit a formal complaint or appeal a decision made by Austra College. All submissions will be handled in line with our Complaints and Appeals Policy and the Standards for RTOs 2025.

Section 1: Student Details

Full name			
Date of birth	Click here to enter a date.	**Student ID**	
Email contact			
Phone contact			
Course Title/Code:			
Trainer/Assessor			

Section 2: Submission Type

☐ **Complaint**	(concerns about services, staff conduct, access to resources, facilities, unfair treatment, etc.)
☐ **Appeal**	(disputes about decisions made—e.g. assessment outcomes, RPL results, disciplinary actions)

Section 3: Incident/Decision Details

Detail	Information
Date of Incident/Decision	

Location (if relevant)	
Names of Persons Involved	

Section 4: Description of the Issue

Please provide a detailed explanation of your complaint or appeal. Include what happened, when it happened, and the impact on you:

Section 5: Outcome You Are Seeking

Please describe what you would like to see happen as a resolution:	

Section 6: Supporting Documentation

Please list any evidence you are submitting (emails, screenshots, assessments, communications, etc.):	…… …… …… …… …… ……

☐	I have attached supporting evidence.
☐	No evidence is available at this time.

Section 7: Declaration

I declare that the information provided in this form is true and accurate to the best of my knowledge. I understand this complaint/appeal will be dealt with fairly and in confidence. I acknowledge that lodging this form will not affect my enrolment status or training progress unless advised otherwise.

Student Signature: _____

Date: _____

Section 8: RTO Office Use Only

Field	Detail
Received By (Staff Name)	
Date Received	
Complaint/Appeal Reference	
Acknowledged on (Date)	
Action Taken	
Outcome Provided	
Date Outcome Communicated	
Further Action Required?	☐ Yes ☐ No

Referred to Independent Reviewer?	☐ Yes ☐ No
Staff Handling This Case	
Finalised On	