Glencoe Institute of Higher Education

Student Grievance and Appeal Form

Purpose

This Form enables students to lodge a formal complaint, grievance, or appeal regarding academic or non-academic matters affecting their studies at Glencoe Institute of Higher Education, in accordance with the *Student Grievance Management Policy and Procedure*. All grievances will be treated confidentially in accordance with this *Policy*.

Students are encouraged to attempt informal resolution where appropriate before submitting a formal grievance.

Please submit this Form to the Student Services Officer at Glencoe Institute of Higher Education in person at Level 2, 100–104 Murray Street, Perth WA 6000, Australia, or via email to info@glencoeinstitute.com.au.

Personal Information			
Submission Date:			
Student ID:			
Title:	☐ Mr ☐ Ms ☒ Mrs ☐ Other _____		
Family Name:			
Given Name/s:			
Course/ Major:	Bachelor of Business Administration ☐ Accounting Major ☐ Information System Major ☐ Hospitality Management Major ☐ Marketing Major		
Email Address:		Mobile No.:	
Preferred Contact Method (optional):	☐ Email ☐ Telephone ☐ No response required (Feedback only)		

Support Person *(Optional)*			
Students may nominate a support person (optional) who may accompany them during meetings relating to this grievance or appeal.			
Support Person Name:			
Relationship to Student:		Contact No.:	

Nature of the Submission			
Please tick the option that best describes your submission:	☐ Complaint / Grievance (Concern regarding services, conduct, or decisions affecting your studies) ☐ Appeal (Request to review an academic or administrative decision)		
Date the issue occurred:			
Have you previously raised this matter with the Institute?	☐ Yes *If Yes, please provide details below.* ☐ No		
Date the issue was previously reported *(if applicable):*			
Method of communication:	☐ Email ☐ Phone ☐ Meeting ☐ Other _____		
Staff member contacted:		Position of staff member:	

Description of the Issue

Please provide a detailed explanation of the complaint or appeal.

Include relevant information such as:

- What occurred;
- When and where it occurred;
- Individuals involved;
- Any steps already taken to resolve the matter.

Attach additional pages if necessary.

Please list any document/s you have attached to support your submission (e.g., emails, letters, screenshots, medical certificates, or academic records).

Document Description/S	Attached
	☐
	☐
	☐
	☐

Resolution Requested

Please describe the resolution you are seeking.

Examples may include:

- Review of an academic decision;
- Clarification of a process;
- Reconsideration of an outcome;
- Corrective action or administrative review.

Declaration

By signing this Form, I confirm that:

1. The information provided in this submission is accurate and complete to the best of my knowledge;
2. I understand that the Institute may request additional information to assist in reviewing this matter;
3. I acknowledge that the Institute will assess this submission in accordance with its policies and procedures;
4. I consent to the Institute collecting, using, and managing my personal information for the purpose of investigating and resolving this complaint or appeal in accordance with applicable privacy legislation.

If the internal grievance or appeal process does not resolve the matter to my satisfaction, I understand that I may seek external review through an appropriate independent external body (such as the *Commonwealth Ombudsman* or *Overseas Students Ombudsman* where applicable).

Signature:			
Full Name:		Date:	

Official Use Only					
Reference No.:			Date Received:		
Receiving Staff Member:			Position:		
Outcome / Action Taken:					
Student Support Manager:		Signature:		Date:	
Dean (or Delegate):		Signature:		Date:	

Note: The outcome of this grievance or appeal will be communicated to the student in writing and documented and retained in accordance with the Institute's *Records Management Policy and Procedure*.