

## THE BISHOP OF WINCHESTER ACADEMY COMPLAINTS PROFORMA

### PERSONAL DETAILS

NAME:

TITLE (Mr, Mrs, Ms etc.)

ADDRESS:

EMAIL ADRESS:

HOME TELEPHONE:

MOBILE:

### STUDENT DETAILS

NAME OF STUDENT:

MENTOR GROUP:

### NATURE OF COMPLAINT

### WHAT ACTION, IF ANY, HAVE YOU ALREADY TAKEN TO TRY AND RESOLVE YOUR COMPLAINT?

**DETAILS OF COMPLAINT** (please attach additional sheets as necessary)

**WHAT IS YOUR EXPECTED OUTCOME?**

Signature\_\_\_\_\_

Date\_\_\_\_\_