

THANK YOU FOR YOUR FEEDBACK!

IF YOUR FEEDBACK RELATES TO A COMPLAINT, PLEASE ATTEMPT TO RESOLVE YOUR COMPLAINT DIRECTLY WITH THE TRAINER OR STAFF MEMBER BEFORE COMMENCING THIS PROCESS.

## STUDENT DETAILS

Student Name:

Date of Birth:

/ /

Email address:

Mobile Phone:

Today's Date:

/ /

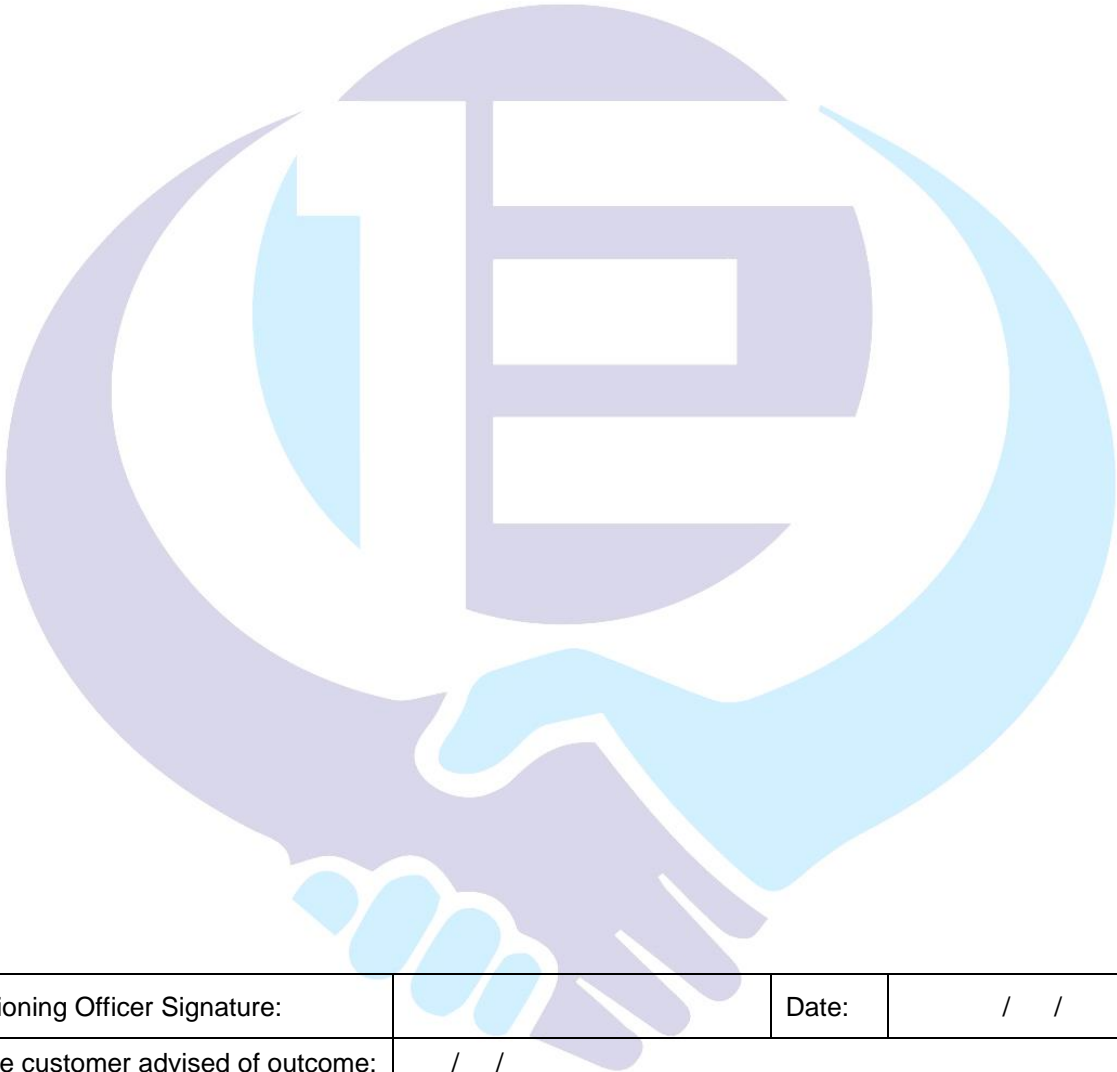
Details:

Have you approached a 1 Education staff member about this matter?  Yes  No

Name of 1 Education staff member:

Date discussed: / /

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OFFICE USE ONLY			
Actioning Officer:			
Date received:	/ /		
Investigation Findings and Recommendation/s:			
			
Actioning Officer Signature:		Date:	/ /
Date customer advised of outcome:	/ /		
Date entered into Register for tracking:			