**APPENDIX A Complaint Form (Stage 2)**

**Please complete and return to the Complaints Officer**

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| **Your name:** |  |
| **Pupil’s name:** |  |
| **Your relationship to the pupil:** |  |
| **Address:** |  |
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| **Postcode:** |  |
| **Main telephone number:** |  |
| **Alternative telephone number:** |  |
| **Please give details of your complaint.** |  |
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| **What action, if any, have you already taken to try and resolve your complaint.****(Who did you speak to and what was the response)?** |  |
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| **What actions do you feel might resolve the problem at this stage?** |  |
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|  |
| **Name:** |  |
| **Signature:** |  |
| **Date:** |  |