

COMPLAINTS REPORT FORM



THE COLLECTIVE
DANCE ACADEMY

Please fill in any details relevant to your report. Reports may be anonymous. Please use this form to report:

**Date of
Report:**

Name:

**Phone
Number:**

**Email
Address:**

**Your Role at
TCDA:**

Staff

Student

Parent/Guardian

Other:

**Record
Details:**

Include: Date, time, location, details of the incident, disclosure or behaviour.
Provide details of any witnesses. Attach additional pages if necessary.

**Risk of
Significant
Harm:**

Does your complaint indicate a child or young person is at risk of significant harm?
(This includes physical, sexual and emotional abuse, and neglect)
YES NO (If yes, you should report this on 132 111)

Other Agencies

Have other agencies been contacted? (e.g. NSW Police)

YES NO (If yes, give details below)

Agency:

Person spoke to:

Date of Contact:

Action:

List action taken to rectify complaint/incident

Follow Up Required:

Reporter at TCDA:

Print Name: _____

Signed: _____

Date: _____