

Avalon College Complaint Form

1. Your Details

This form is for use by students, parents, guardians, staff, volunteers, or members of the Avalon College community who wish to make a formal complaint. This process is governed by the **Complaints & Grievances Policy (AB-GOV-010)**.

All complaints will be treated seriously and confidentially. Complaints may be submitted in person, by email to admin@avaloncollege.vic.edu.au, or delivered to Reception.

Name of person lodging complaint:
Name of person louging complaint.
Relationship to Avalon College:
\square Student \square Parent/Guardian \square Staff \square Volunteer \square Other:
Contact details:
Phone:
Email:
Preferred method of contact: \square Email \square Phone \square Other:
2. Details of Complaint
Date of incident or issue:
Location (if applicable):
People involved (if known):
Summary of complaint (please describe clearly what happened):

Document Reference: AB-GOV-011 Effective Date: 27 March 2025 Next Review Date: 27 March 2026

Approved by: Avalon College Managing Director

Has this issue been raised informally with a staff member?
☐ Yes – please describe:
\square No
What outcome or action are you seeking?
3. Child Safety-Related Complaints (if applicable)
Is this complaint related to a child safety concern or reportable conduct?
☐ Yes ☐ No
If yes, please ensure the Child Safety Officer or Managing Director is notified immediately.
Complete the relevant child safety documentation if required.
4. Declaration
I declare that the information provided above is true and correct to the best of my knowledge.
Signature:
Date:
(Internal Use Only – Completed by Staff)
Date complaint received:
Received by (staff name):
Investigator (if assigned):
Action Taken / Investigation Summary:

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Outcome / Resolution:
Was the complainant informed of the outcome in writing? \square Yes \square No
Date response issued:
•
Further estimate was included a facilities of No. 17 May Detaile.
Further action required / Escalation: ☐ No ☐ Yes — Details: