Little Melton Primary School

**APPENDIX 2**

**Formal Complaint Form**

*Please return to the school office or Headteacher once completed*

Your name:…………………………………………………………………………………………... Relationship with school (eg parent, guardian or carer of a pupil on the school roll):

………………………………………………………………………………………………………… Pupil’s name (if relevant to the matter to be discussed):……………………………………….. Your address:………………………………………………………………………………………...

Telephone numbers:

Daytime:……………………………………………Evening:………...………………………………………

Email address:……………………………………………………………………………………………….... Signed:…………………………………………………………………….. Date:………………………..

Please give concise details of your complaint (including dates, names of witnesses etc.) to allow the matter to be fully investigated:

Continue on separate sheet if necessary and attach additional documents if you wish.

*Number of additional pages attached……………………………………………………..*

What action, if any, have you already taken to try to resolve your complaint? (ie who have you spoken to or written to and what was the outcome?)

What actions do you feel might resolve the problem at this stage?

Signed:……………………………………………… Date:………………………………………..

**School use**

**Date form received:………………… Date acknowledgement sent:………………… Received by:………………………… Acknowledgement sent by:……………………**

**School use**

**Complaint referred to:……………………………………………………………………… Date:……………………………………………………………………………………………**