

Candidate Complaints Form

Appendix A: Complaints Form: Stage 1

Candidate name		Telephone number	
Tutor name		Service Manager	
Employer Name		Learning Site	
Line Manager Name		HR Contact	
Programme of study and level		Date Complaint notified to Centre	
Reason for complaint (<i>attach supporting evidence as required</i>)			
Centre decision and outcome:			



Department for Education

To be completed by the candidate:

I agree with / wish to appeal against this decision (*delete as appropriate*)

Candidates signature:		Date:	
Centre signature:		Date:	

Appendix B Complaints Appeal Form: Stage 2

Candidate name		Telephone number	
Tutor name		Service Manager	
Employer Name		Learning Site	
Line Manager Name		HR Contact	
Programme of study and level		Date appeal notified to tutor	
Reason for Appeal			
Date appeal notified to Director			
Date, time, location of meeting with candidate		Date, time, location of meeting with assessor	
Director's decision:	Original assessment decision upheld / overturned (<i>delete as appropriate</i>)		



Reason for Director's decision:			
To be completed by the candidate:			
I agree with / wish to appeal against this decision <i>(delete as appropriate)</i>			
Candidate signature:		Date:	
Director signature:		Date:	