**SRUC**

**COMPLAINTS HANDLING PROCEDURE FOR STUDENTS, PROSPECTIVE STUDENTS AND MEMBERS OF THE PUBLIC**

**COMPLAINT FORM**

**Information for all complainants**

If you have a complaint about a matter which is the responsibility of SRUC and you have not been able to resolve it by raising the issue directly with the appropriate area or department, please complete the form below to enable us to investigate your complaint. Before doing so, please read the guidance at [insert hyperlink to complaints page].

**Information for students only**

If you are a student (or recent student), we strongly encourage you to speak to your campus senior tutor, Education Office or Students Association representative before completing this form. They have experience of supporting students with complaints and can help you to decide whether making a complaint is the best course of action, or whether another procedure may be more appropriate. They can also explain how the complaint procedure works and what the potential outcomes may be.

**Contact information for support**

Students considering making a complaint can consult the SRUC Students Association or the Education Office.

Once completed, this form may be submitted by email to [complaints@sruc.ac.uk](mailto:complaints@sruc.ac.uk) or by post to:

The Investigations Manager

Professional Services

SRUC

Kings Building

West Mains Road

Edinburgh EH9 3JG

**1. Personal Details**

|  |  |
| --- | --- |
| First Name: |  |
| Last name: |  |
| Name of company or organisation (if appropriate) |  |
| Address: |  |
| Email: |  |
| Telephone: |  |
| Programme of Study :  ***(for students only)*** |  |
| Matriculation No:  ***(for students only)*** |  |

**2. Your Complaint**

A. Please provide a summary of your complaint below (300 words max).

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B. Please describe what action you have taken to pursue the complaint to date (200

words max)**.**

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C. Please explain how you would like your complaint to be resolved (200 words max).

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d. Name of person contacted- if you have already raised the complaint with a member of SRUC staff, please enter details here.

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e. Date of contact (dd/mm/yy).

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f. Method of contact (letter/phone/in person/e-mail etc.).

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**3. Supporting documentation**

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| --- | --- |
| Do you wish to submit any supporting documentation for consideration? | Yes/No |

|  |  |
| --- | --- |
| If “Yes”, please tick here to indicate that what you have submitted is complete |  |

|  |  |
| --- | --- |
| Signature: |  |
| Date: |  |