

Concern Form

Please complete and return to the class teacher or team leader who will acknowledge receipt and explain what action will be taken	
Your Name	
Pupil's Name	
Your relationship to the Pupil	
Address	
Postcode	
Daytime Tel Number	
Evening Tel Number	
Please give details of your concern, including whether you have spoken to anybody at the school about it.	
What actions, if any have you taken to try and resolve your concern	
What actions do you feel might resolve the problem at this stage?	
Are you attaching any paperwork?	
Signature	
Date	
For Office Use only	
Date acknowledgement sent	By Whom
Complaint referred to:	Date:

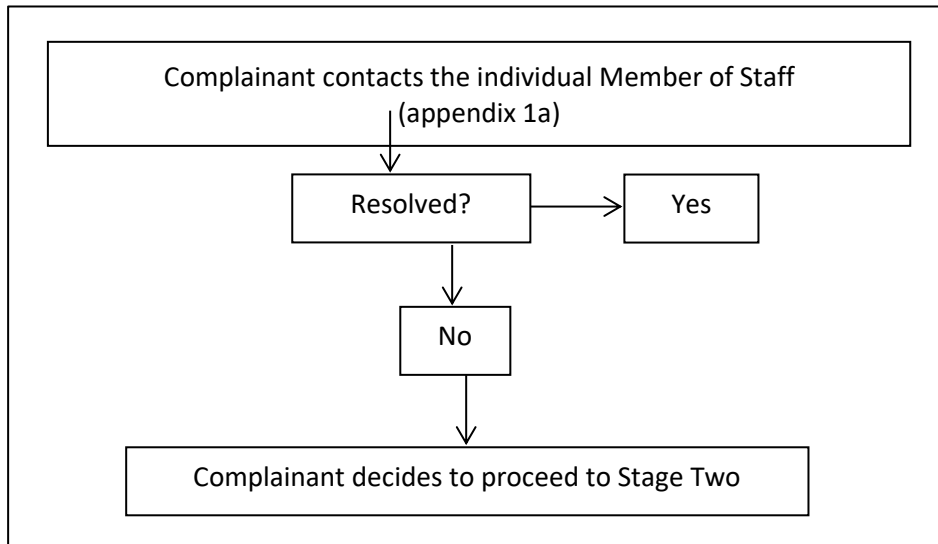
Complaints Form

Please complete and return to head teacher or complaints coordinator via the school office who will acknowledge receipt and explain what action will be taken	
Your Name	
Pupil's Name	
Your relationship to the Pupil	
Address	
Postcode	
Daytime Tel Number	
Evening Tel Number	
Please give details of your complaint, including whether you have spoken to anybody at the school about it.	
What actions, if any have you taken to try and resolve your complaint	
What actions do you feel might resolve the problem?	
Are you attaching any paperwork?	
Signature	
Date	
For Office Use only	
Date acknowledgement sent	By Whom
Complaint referred to:	Date:

Complaints Procedure for Schools – Flowchart

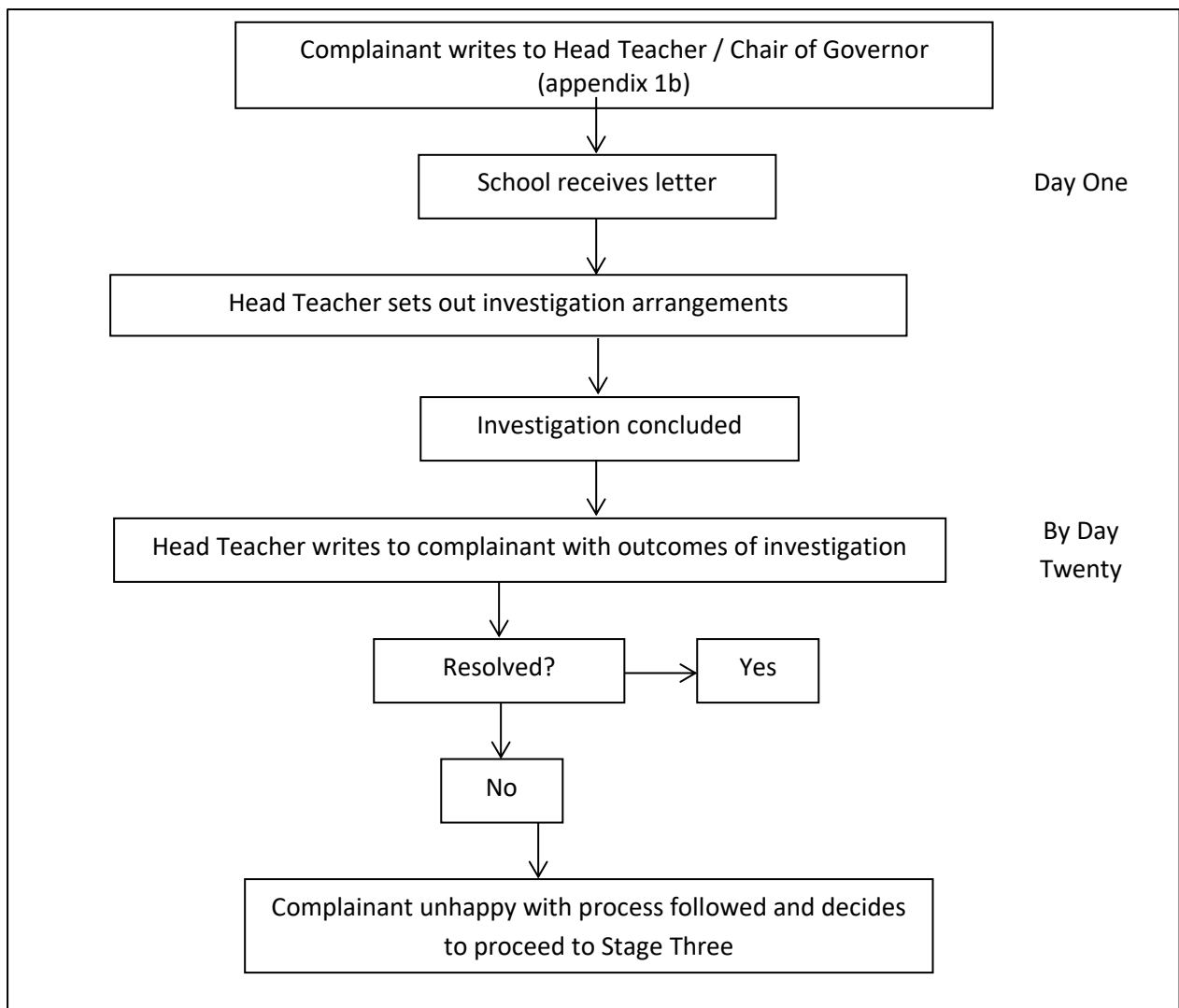
Stage One

Informal Stage

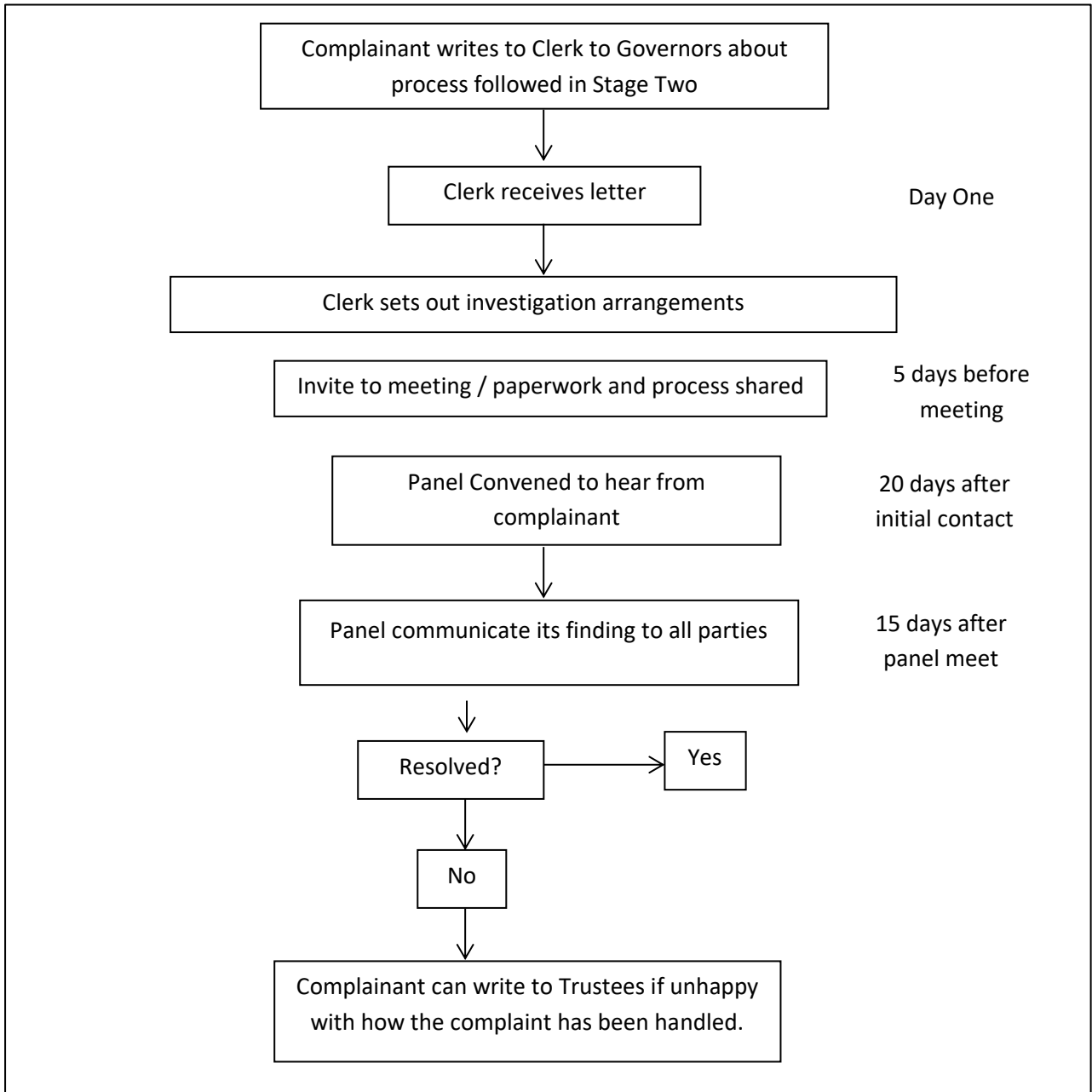


Stage Two

Formal Stage



Stage Three
Governors Review Panel



Trustee Panel

