

## **GLOBAL COLLEGE AUSTRALASIA**

RTO No. 45088 CRICOS CODE: 03564F

21 Moore Street, East Perth, WA 6004 Wellington St Campus 176 Wellington Street, East Perth, WA 6004 General Enquiry: 1300 886 340 Marketing & Enrolment: 0448 465 445 Email: admissions@globalcollege.edu.au

Website: www.globalcollege.edu.au

**Moore St Campus** 

COMPLAINTS LODGEMENT FORM								
SECTION 1 - Personal Details								
Student name		Student ID number						
Email		Tel/ Mobile						
Study course		Intake						
SECTION 2 - Complainant Declaration								
I have read and understood the GLOBAL COLLEGE AUSTRALASIA Complaints Policy and I declare that the other party to the								
complaint may be contacted to resolve the issue. I agree that GLOBAL COLLEGE AUSTRALASIA may conduct independent								
evaluation checks and that I may be requested to submit further information upon request or attend a meeting to discuss								
this matter further.								
The student may access GCA complaints policy anytime via <a href="https://www.globalcollege.edu.au/wp-content/uploads/2023/08/COMPLAINTS-POLICY-V4.pdf">https://www.globalcollege.edu.au/wp-content/uploads/2023/08/COMPLAINTS-POLICY-V4.pdf</a>								
Signature	COMPLAINTS-POLICT-V4.pui	Date						
Signature		Date						
SECTION 3 – Complaint (Please tick the following areas to which your complaint relates)								
☐ Training Materials		Services provided						
☐ Training Facilities		Personal conflict/Behaviour						
Training Content/information		Discrimination						
☐ Training Environment		Victimization						
☐ Training – Other		Privacy Breach						
Other:		_ ,						
Does your complaint involve another person (e.g. Trainer/Assessor/other student)?								
Yes (Please provide their name) No								
Name		Name						
Mobile		Mobile						
Email		Email						
SECTION 4 - Complaint De	tails							
Please outline the nature/circumstances of your complaint:								
What actions have you taken, to resolve this matter:								
TTHAT GETIONS HAVE YOU T	virial actions have you taken, to resolve this matter.							





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What action/resolution would you like to see occur/implemented:						
***Admin Use Only						
Complaint Form Received (Admin)	Initial		Date			
Complaint Lodgement recorded (Register)	Initial		Date			
Letter of Acknowledgement sent	Initial		Date			
Complaint Forwarded to Management	Initial		Date			

