Privacy Notice

Job Skills Training Academy is committed to protecting your privacy and ensuring procedural fairness. Information collected through this form will be used solely for the purpose of investigating and resolving a complaint or appeal in accordance with the Complaints and Appeals Policy and applicable privacy legislation.

SECTION 1: PERSON LODGING THE COMPLAINT OR APPEAL

Date Lodged	
Full Name	
Qualification	
Phone Number	
Email	
Preferred Contact Method	☐ Phone ☐ Email ☐ Other: _____

SECTION 2: TYPE OF MATTER

Please select the type of matter being lodged:

☐ Complaint ☐General Appeal ☐Assessment Appeal

SECTION 3: DETAILS OF THE COMPLAINT OR APPEAL

Details	Information
Subject/Issue	_____
Date of Incident/Decision	____ / ____ / _____
Location (if applicable)	_____

Person(s) Involved	_____

Description of Complaint or Appeal

Please provide a detailed description of the issue, including relevant facts, events, dates, discussions and any other information that may assist in the investigation.

_____

_____

_____

_____

SECTION 4: GROUNDS FOR APPEAL

(Complete only if lodging a General Appeal or Assessment Appeal)

General Appeal

Please tick the applicable ground(s):

☐ Refusal of enrolment ☐Deferral of studies

☐Suspension of enrolment ☐Cancellation of enrolment

☐Fees, charges or refunds ☐Student conduct or disciplinary decision

☐ Access to student support services ☐Administrative Decision

☐ Reasonable adjustment/support arrangements

☐ Certification documentation ☐Procedural fairness concerns

☐ Alleged discrimination or unfair treatment ☐Decision made by a third-party provider

☐ Other: _____

Assessment Appeal

Please tick the applicable ground(s):

☐ Competency outcome (Competent / Not Yet Competent)

☐ Recognition of Prior Learning (RPL)

☐ Credit Transfer decision

☐ Assessment process not followed

☐ Assessment method inappropriate

☐ Student needs not adequately considered

☐ Insufficient information provided regarding assessment requirements

☐ Assessor conduct

☐ Alleged assessor bias

☐ Assessment tool/process not aligned to unit requirements

☐ Equipment or facilities affected assessment outcome

☐ Other: _____

SECTION 5: INFORMAL RESOLUTION ATTEMPT

Question	Response
Have you attempted to resolve this matter informally?	☐ Yes ☐ No
Person contacted	_____
Date discussed	____ / ____ / _____
Outcome of discussion	_____

Additional Information:

SECTION 6: SUPPORTING DOCUMENTATION

Please list all supporting evidence attached to this form.

Document Description	Attached
_____	☐
_____	☐

_____	☐
_____	☐
_____	☐

Examples may include:

☐ Emails

☐ Assessment Evidence

☐ Screenshots

☐ Photographs

☐ Witness Statements

☐ Feedback Records

☐ Medical Documentation

☐ Other Supporting Evidence

SECTION 7: DESIRED OUTCOME

Please describe the outcome or resolution you are seeking.

_____

_____

_____

SECTION 8: SUPPORT PERSON / REASONABLE ADJUSTMENT REQUIREMENTS

Question	Response
Do you require assistance, support or reasonable adjustment during the process?	☐ Yes ☐ No
If yes, provide details	_____
Do you wish to be accompanied by a support person?	☐ Yes ☐ No
Support Person Name	_____

Relationship to You	_____
Contact Details	_____

SECTION 9: DECLARATION

I declare that the information provided in this form is true and accurate to the best of my knowledge. I understand that Job Skills Training Academy may request additional information to assist in investigating and resolving this matter.

I acknowledge that this complaint or appeal will be managed in accordance with Job Skills Training Academy's Complaints and Appeals Policy and Procedure.

Declaration	Details
Name	_____
Signature	_____
Date	____ / ____ / _____

OFFICE USE ONLY

Item	Details
Reference Number	_____
Date Received	____ / ____ / _____
Received By	_____
Matter Type	☐ Complaint ☐ General Appeal ☐ Assessment Appeal
Acknowledgement Sent	☐ Yes ☐ No
Date Acknowledged	____ / ____ / _____
Investigator / Reviewer	_____
Outcome	☐ Upheld ☐ Partially Upheld ☐ Not Upheld ☐ Resolved Informally ☐ External Review Required
Date Closed	____ / ____ / _____

Continuous Improvement Required	☐ Yes ☐ No
CI Register Reference	_____

Notes / Actions