



# INTERNATIONAL BRITISH PRIMARY SCHOOL

## COMPLAINT FORM

Please complete and return to the Head Teacher who will acknowledge receipt and explain what action will be taken.

Your name:

Pupil's name:

Your relationship to the pupil:

Address:

Telephone number(s):

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Please give details of your complaint:

Date complaint was made:

Action already taken to resolve the matter, if any. (Who did you speak to and what was the response)?



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What actions do you feel might resolve the issue at this stage?

Are you attaching any paperwork? If so, please give details.

Signature:

Date:

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### **Official Use**

Date acknowledgement sent:

By who:

Complaint referred to:

Reason for referral:

Date:



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