

CONFIDENTIAL

LIVERPOOL EDUCATION AUTHORITY
PROCEDURE FOR DEALING WITH GENERAL COMPLAINTS
FORM TO REGISTER A FORMAL COMPLAINT

Name of School:

Personal Details:

Name

Address:

Tel Number:

.....(work)(home)

Pupil Details
(if applicable):

Name of Pupil:.....

Class/Form:.....

Date incident took place.....

Name of any witness(es):.....

Details of Complaint [Please state clearly the nature of complaint]:

[If necessary, additional information may be included on a separate sheet, which should be signed and attached to this form]

Signed:

Date:.....

*Persons making a complaint must register the complaint within 3 months of the incident.

Note This form should be returned to the head teacher, unless the complaint is against the head teacher, in which case it should be forwarded to the Chair of Governors.