

Student Suggestion/Compliment/ Complaint Form

| Student Name: | Contact Number: |
|------------------------|-----------------------|
| | |
| Staff member name: | Date: |
| | |
| Course Code and Title: | Term/Dates of course: |
| | |

Summary of Nature of Suggestion/Compliment/Complaint

Description of Suggestion/compliment/complaint:

If specific situation:

Date:

Time:

Location:

Suggestion for improvement:

Student signature:_____

Date: _____

Office use only: **VET Manager acknowledgement of receipt** Signature:

Date: