Complaint form

Please complete the relevant sections and attach supporting documents where required. Contact Elite Edge Training Academy if you need help completing this form.

You may make a complaint about Elite Edge Training Academy, a staff member, contractor, third party or another student. Informal resolution is optional. Making a complaint will not disadvantage you.

Your details

Full name	
Student ID, if applicable	
Course	
Email	
Telephone	
Preferred contact method	☐ Email ☐ Telephone ☐ Other: _____

Complaint details

☐ Training or assessment
☐ Staff member or contractor
☐ Third-party service
☐ Another student
☐ Fees or refund
☐ Privacy
☐ Access or support
☐ Other

What happened? Include relevant dates, people and locations.

What steps, if any, have already been taken?

What outcome are you seeking?

☐ This matter involves an immediate safety or wellbeing concern.

☐ I have attached supporting documents.

☐ I would like assistance, reasonable adjustment or a support person.

Declaration

I confirm that the information provided is true and complete to the best of my knowledge. I understand that relevant information may be shared where necessary to investigate the complaint and provide procedural fairness.

Name	
Signature	
Date	

Office use only

Date received	
Register reference	
Acknowledged within two business days	☐ Yes Date: _____
Assigned to	
Conflict of interest checked	☐ Yes ☐ No
Target completion date	
Outcome	☐ Upheld ☐ Partly upheld ☐ Not upheld ☐ Other

Decision, reasons and corrective action

Written outcome sent	Date: _____
Further review options explained	☐ Yes ☐ Not required
Continuous improvement action recorded	☐ Yes ☐ Not required
Closed by and date	

Timeframe: The complaint will be acknowledged within two business days and the RTO will aim to resolve it within 30 calendar days. Any delay will be explained in writing.

Document control

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Relevant requirement	Outcome Standard 2.7
Version	v1.1
Document owner	Chief Executive Officer
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