

GETTING IT RIGHT

This form should be used if you wish to make a formal complaint; to make a suggestion about how to improve a service; to praise a member of staff or a team.

Name: Mr, Ms, Miss, Mrs	
Contact Address:	
	Postcode:
Contact Tel No:	Mobile:
Email address:	

Are you a:	Please tick
Visitor	<input type="checkbox"/>
Member of staff	<input type="checkbox"/>
Learner	<input type="checkbox"/>
If you are a learner, please tell us your college ID number: _____	
and programme area / course : _____	

<p>Please tell us which of the following your suggestion or complaint relates to:</p> <ul style="list-style-type: none"> • A service provided by the college <input type="checkbox"/> • Teaching or assessment standards on your course <input type="checkbox"/> • Actions or lack of action by the college and/or its staff <input type="checkbox"/> • College provision <input type="checkbox"/> • An act of discrimination or other acts which infringe the rights of others <input type="checkbox"/> • An incident of bullying (including cyber bullying) <input type="checkbox"/> 	<i>Please tick</i>	<p>These questions are optional. They are asked purely to help us ensure that we are delivering our services without bias or discrimination.</p> <p>My age is: Under 20 <input type="checkbox"/> 20 – 24 <input type="checkbox"/> 25 – 49 <input type="checkbox"/> 50 – 59 <input type="checkbox"/> 60 – 65 <input type="checkbox"/> 65+ <input type="checkbox"/></p> <p>I am: Bangladeshi <input type="checkbox"/> Indian <input type="checkbox"/> Black (African) <input type="checkbox"/> Pakistani <input type="checkbox"/> Black (Caribbean) <input type="checkbox"/> White <input type="checkbox"/> Black (other) <input type="checkbox"/> Other <input type="checkbox"/> Chinese <input type="checkbox"/> I prefer not to say <input type="checkbox"/></p>
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Please give full details of your suggestion, comment or complaint.
 (You may continue onto another sheet if required)

If this is a complaint, please indicate what you think should be done to put things right.

Signature:	Date:
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Please return form to: Diane Garswood/Amanda Houghton Smith, PA to the Vice Principal Curriculum and Quality

Accrington and Rossendale College, FREEPOST BK 799, Accrington, BB5 2YX

Alternatively, this form can be hand delivered to the college reception, Library+ or Info+ or emailed to ideas@accross.ac.uk.

COLLEGE USE ONLY: Record of action with dates									
Date Received	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Date to Manager	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>