

STUDENT COMPLAINT FORM**VERSION HISTORY**

VERSION	REVISION DATE	DESCRIPTION OF CHANGE	AUTHOR
1	23/08/2021	original	Operations Mgr (SY)

1. Your details**Full name****Student number****Programme of study** (e.g. Neurosurgery PgDip)**Year/cohort of study** (e.g. Sept 2021)**2. Summary of the complaint**

Please detail the nature of your complaint including how the circumstances have affected you and the dates that the issues occurred.

3. Resolution attempts

Please detail the actions you have already taken to resolve your complaint including the names of members of staff you have approached and the dates and details of those communications. Please note, before submitting a formal complaint you are expected to have raised your concerns with Student Services.

Please explain why you are not satisfied with the response you have received at the early resolution stage.

4. Outcome sought

Please detail what reasonable outcome or further action you are expecting.

5. Supporting evidence

Complaints must be supported by corroborating evidence. Please list the evidence attached in support of your complaint.

6. Confidentiality statement and declaration

Confidentiality Statement:

This complaint form and supporting documentation will remain confidential to relevant staff members, as appropriate, and will be shared for the purposes of considering and responding to this information.

Declaration:

- I have read and understood the Student Complaints: Policy and Procedure.
- All information and documentation provided in/with this form is complete and represents an accurate and true record of my complaint. I understand that the submission of a falsified complaint or documentation constitutes an offence under the misconduct regulations.
- I authorise the reviewer(s) of this complaint to consider this complaint form and any relevant information held by Learna to the extent necessary for the consideration of my submission.
- I give permission for Learna to seek verification of the authenticity of any statements or evidence provided with this claim.
- I have read and understood the Confidentiality Statement and consent to my form being shared confidentially with relevant staff members, as appropriate.

Student signature:**Date:**

Please submit this form and accompanying documentation to support@learna.ac.uk

7. Decision

Your complaint form and accompanying documents have been considered by the:

- ☐ Operations Manager (Learna)
- ☐ Academic Director (Learna)
- ☐ Director of Studies (Learna)
- ☐ relevant University personnel

The following decision has been made regarding your complaint:

The Office of the Independent Adjudicator for Higher Education (OIA) runs an independent scheme to review student appeals and complaints once all internal procedures have been completed. The University is a member of this scheme. If you are unhappy with the outcome you may be able to ask the OIA to review your appeal. You can find more information about making a complaint to the OIA, what it can and cannot look at and what actions it is able to take here: <https://www.oiahe.org.uk/students>.

Signed:**Date:**

Complaint received:		University outcome received:	
Complaint escalated to University:		Response sent:	
Action required:			