

Sydney International Academy Pty. Ltd. t/a NSW International English College
Level 2, 38 College Street, Darlinghurst, NSW 2010;
PO Box 41 Darlinghurst, NSW 1300
Tel: +61 (0)2 80570837 Email: admin@nswenglish.com.au: Web: www.nswenglish.com.au

ABN: 17 121 012 940: CRICOS Provider Code: 02871C

Complaints & Appeals Form

Instructions for students:

- Before you make a formal complaint or appeal, you should firstly discuss the matter with the appropriate member of staff, for example, your teacher or Student Services Officer. If the issue was not resolved, you should then have meet the Director of Studies to discuss your concern. If you have not followed these steps, please do so before you proceed with completing this form and lodging a formal complaint or appeal.
- Please read the Complaints & Appeals Policy & Procedures. If you have any questions, please ask at Student Services.
- Please complete all parts of this form.

•	Please snow which type of complaint or appeal you wish to lodge:		
		Academic complaint (for example, your examination results, course, etc.)	
General compliant (about NSW IEC's services, facilities, member of staff			
		Appeal against NSW IEC's decision to report you to DIBP	
		Appeal against NSW IEC's decision to suspend or cancel your enrolment.	

Part 1: Personal Details

Your title:	
Your Surname:	
Given Name:	
Student number:	
Phone No.	
Email address:	

Part 2: Your Complaint or Appeal

Please provide as much details as possible including dates, names of people, places, how the problem has affected you, etc.

I would like to complaint about, my rate of attendance, being treated unfairly, my test results,



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Please add another page and staple it to this form if you need to.			
Part 3: Declaration & Signature			
• I have read NSW IEC's Complaints & Appeals Policy & Procedure and	I understa	and that it	s contents
	Yes □		No □
I have attached any documents that will support my complaint or appeal		Yes \square	No 🗆
I understand that I will receive the outcome of my complaint or appeal will receive the outcome.	thin 10 wo	orking day	s of my meeting
with the Appeals Review Committee.		Yes 🗆	No 🗆
declare that all the information above and in any supporting documentation is t	true and a	ccurate.	
Student's name:			
Students signature: Date:			
O65 - 11-21			
Office Use only Appeals Review Committee response			



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Appeal upheld Appeal refused		
Written outcome issued to student $Yes \square$	No □	
Signed:	Name:	Date: