

Office Use Only

Complaint/Appeal Receiving staff member: _____ Date: ___/___/___

Method of lodgment:

- Email
- In person

Name of members in panel for resolving the issue: _____

Actions proposed by panel: _____

Implementation of Proposed action by:

- Continuous improvement Request.
- Counselling by the relevant persons.
- Change of any service or member.
- External Counselling agency

Other (Please specify):

Outcome: Successful Unsuccessful

Response of complainant/appellant:

- Agrees and accepts the decision done by panel (The student signs the acceptance, and the record is placed in student's admin file)
- Disagrees and unhappy (Student Support Officer will contact student to help student to access services of Overseas Student Ombudsman-<https://www.ombudsman.gov.au/complaints/international-student-complaints>)

Declaration by complainant

(Please acknowledge and sign):

- I acknowledge that I have been communicated the outcome of the complaint/appeal lodged by me.
- I agree to the decision made by the panel and happy to accept it.
- I disagree to the decision made by the panel and would like to escalate it to an external body, and I have been advised of all the required information in this regard.
- I have visited- https://www.accm.vic.edu.au/files/ugd/6ba6c0_aff88633c96e4ee5ba4b50db14af77e1.pdf

Email: support@accm.vic.edu.au

Signature of complainant: _____ Date: ___/___/___

Print Name: _____

Signature of ACCM Staff _____ Date: ___/___/___

Print Name: _____