

Staff Complaint Lodgement Form

Before lodging a formal complaint, staff are requested to read carefully the Staff Grievances Policy and Procedure relating to staff grievances and/or complaints. A grievance/complaint will not be formally investigated until all efforts by the aggrieved staff member to resolve the grievance through informal processes has been exhausted.

Completed grievance lodgement forms are to be sent to the Human Resources Officer in a sealed envelope marked 'CONFIDENTIAL'.

Please note, the contents of this form (which describes the complaint, steps taken to resolve the grievance/complaint, and the desired outcome) will be distributed to the other parties to the grievance/complaint. All personal information provided at the beginning of this form (excluding your name) is for administration purposes only and will be kept confidential.

1. STAFF MEMBER DETAILS

Family name	First name
Staff ID	Contact number
AIHE email address	

2. COMPLAINT DETAILS		
DESCRIBE YOUR COMPLAINT – including the parties to the complaint (attach extra pages if necessary)		
WHAT HAVE YOU DONE TO RESOLVE THE COMPLAINT (attach extra pages if necessary)		

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WHAT IS YOUR DESIRED OUTCOME THAT YOU BELIEVE WOULD SETTLE THE COMPLAINT (attach extra pages if necessary)		
3. ADDITIONAL INFO	RMATION	
documents please list th	ional information related to your complaint. If you are a ese here.	attaching supporting
4. STAFF DECLARA	TION	
 By lodging this form I certify that: I believe the information I have provided on this form and in the attachments to the form is true, accurately represents the facts and includes all information relevant to my complaint. I understand that the failure to provide accurate, honest and relevant information may be an offence under the AIHE Staff Code of Conduct. I understand that the investigation of my complaint may require me to provide further information, answer questions and make myself available to attend a meeting/s. I understand that the investigation of my complaint may be terminated if I do not treat staff with courtesy and respect, or I engage in behaviour that places health or safety at serious risk or substantially impacts AIHE's resources, or I do not cooperate with the review of my complaint, including by providing relevant information. 		
Signature:		Date:
Office Use Only		
Date received:		
Referred to:		
Date referred:		