

## CUSTOMER COMPLAINTS FORM

If you require assistance with making a complaint, please speak to staff at Reception or Student Services or email [complaints@swc.ac.uk](mailto:complaints@swc.ac.uk). Every effort will be made to ensure confidentiality, consistent with a full investigation of the issue.

*If you are submitting a complaint on behalf of someone else, please provide their name/contact details in Section 1B. We may contact the individual for permission to discuss the issue with you.*

This form should be returned to the Quality Assurance Manager, Dungannon Campus, Circular Road, Dungannon BT71 6BQ or emailed to [complaints@swc.ac.uk](mailto:complaints@swc.ac.uk)

### SECTION 1A – Complainant Details

<b>Title:</b>	Miss / Mr / Mrs / Ms/Other:
<b>Name:</b>	
<b>Contact Address:</b>	<b>Telephone Number:</b>
<b>Email:</b>	
<b>Course (if applicable)</b>	
<b>Student ID (if applicable)</b>	
<b>Status (please tick which of the following applies. You are:</b>	A student (up to and including Level 3)
	A student (Level 4 and above)
	Parent or Guardian
	Member of the Public
	Employer
	Organisation

### SECTION 1B – Details of person on whose behalf you are submitting complaint, if different to above

<b>Title:</b>	Miss / Mr / Mrs / Ms /Other:
<b>Name:</b>	
<b>Contact Address:</b>	<b>Telephone Number:</b>
<b>Email:</b>	
<b>Course (if applicable)</b>	
<b>Student ID (if applicable)</b>	
<b>Do you have their consent to raise this matter?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Status (please tick which of the following applies. You are:</b>	A student (up to and including Level 3) A student (Level 4 and above) Parent or Guardian Member of the Public Employer Organisation

## **SECTION 2**

**Details of Complaint:** Please ensure that all details are provided, including (if relevant) date, time and place of the event; and names of those involved. You may attach additional sheets if necessary.

**Have you attempted to resolve this issue informally?** Yes      No

If Yes, please summarise any action taken to resolve your issue/s to date.

## **Section 3**

**What do you see as a suitable remedy to address the issue or matter raised?**

PRIVACY NOTICE: Information gathered on this form will be processed within the provisions of the General Data Protection Regulations and used for the purpose of investigating your complaint. The College is permitted to process personal data where there is a "lawful basis" to do so. This processing is necessary for the performance of a public task or in the exercise of official authority vested in the College as a Data Controller e.g., Public Authorities are subject to the Northern Ireland Public Services Ombudsman (NIPSO). Your information may be shared with authorised third parties such as NIPSO, legal professionals where there is lawful basis to do so. For further guidance on how we hold your information please visit the Privacy Notice at [Link to privacy notice at www.swc.ac.uk/discover/public-information/data-protection](http://www.swc.ac.uk/discover/public-information/data-protection)

**Please circle your response below:**

*I agree to be contacted by any method provided on this form in respect of my complaint. Yes/No*

*I understand that a copy of this form may be shared with relevant College staff if they are the subject of the issue. Yes/No*

*I realise if I choose not to agree to these terms, the College will not be able to investigate my complaint. Yes/No*

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **Office Use Only**

Date Received:

Date Acknowledged:

Received By:

Owner: