**ALPS Complaint form**

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| **Your name:** |
| **Pupil’s name (if relevant):** |
| **Your relationship to the pupil (if relevant):** |
| **Address:**  **Daytime telephone number:**  **Evening telephone number:** |
| Please give details of your complaint, including whether you have spoken to anybody at the school about it. |

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| What actions do you feel might resolve the problem at this stage? |
| Are you attaching any paperwork? If so, please give details. |
| Signature:  Date: |
| Official use |
| Date acknowledgement sent: |
| By who: |
| **Complaint referred to:** |
| **Date:** |