



PARENT/CARER FEEDBACK FORM

Any parent/carer who wishes to give feedback/complain is asked to fill out this form and return it the School Admin team/Reception office. All complaints will be processed in accordance with the School Policy.

1. Parent/Carer Name: _____ DATE: _____

2. Please state the **date of the event, or series of events** causing the feedback/complaint:

3. Please state the **details of your feedback/complaint**:

4. Please state the **specific facts** (of which you are aware), to support your feedback/complaint.
 Please list these in detail:

5. What is your **desired** outcome?

(Please use the other side of this paper if required).

Signed **Date**

Contact Telephone Number (s)

Name in full, written in block capitals

For staff use only:	Received by:		Date:	Comments below:
	Dealt with by:		Date:	