

Regent College London

Student Complaints Procedure –

Stage 3: Appeal against the Outcome of a Complaint

You need to complete this form to lodge an appeal against the outcome of a complaint. You should only make an appeal after you received the response of the Stage 2 complaint and if you are not satisfied with the outcome. The completed Form should be submitted to the Principal of Regent College London within 10 working days of receipt of the response, explaining why you are not satisfied with the outcome. Please ensure that you fully complete every part of this form. Within ten working days of receipt of the complaint, the Principal will decide if there appears to be a case to refer to the Complaints Review Panel. You will receive a letter informing you of whether or not a Complaints Review Panel will be convened to look into your appeal.

If you have any questions or queries please contact the Head of Academic Standards & Quality Enhancement.

1 Student Details

Surname:	First Name:
Student ID:	Address:
Course:	
Tel. No.:	Email Address:

2 Decision being appealed against

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- 3 Please give further details about your Appeal, together with any evidence and/or facts that you wish to submit so that those involved in reviewing the appeal can clearly follow the case. The supporting evidence may include a timeline of events. The Panel will have access to evidence submitted in the original Complaint process.

4 **Preferred Outcome of Appeal**

Please set out **clearly** and **concisely** the preferred outcome from your appeal.

5 Declaration

Data Protection Act 2018

By signing this form you are also agreeing to the following:

- ☐ I have read and understood the *Regent College London's Complaints Policy and Procedure* and completed all sections of this form accurately and to the best of my knowledge.
- ☐ The information I have given on this form is accurate and true to the best of my knowledge.
- ☐ I have enclosed a copy of the relevant letter/email which confirms the outcome I am appealing against and I have included any relevant documentary evidence.

Signature..... **Date**.....

DECISION (To be completed by the Principal):

- ☐ Accept Name: _____
- ☐ Partial Accept
- ☐ Reject Date: _____

Summary of reasons and outcome (if relevant)

Author	Head of Academic Standards & Quality Enhancement
Version	Version 1.1
Update	February 2020
Approval	Academic Board February 2020
Review Date	August 2020