

**PHEASEY PARK FARM PRIMARY SCHOOL AND CHILDREN'S CENTRE
COMPLAINT FORM**

Name of Parent/Person making Complaint _____

Relationship to School _____

Name and Class of Child (If relevant) _____

Nature of Complaint:

Who have you already spoken to about this and what action has been taken?

Please hand this form into the School Office.

OFFICE USE ONLY

Further Action Agreed:

Action Taken

Date	Actions	Staff	Feedback/Communication with Complainant

Resolutions

Date	Resolution	By	Review Date