## Personal Details

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| **Full name** | Click or tap here to enter text. |
| **Staff or Student number**(If applicable) | Click or tap here to enter text. |
| **Relationship with University if not Staff, Student or Alumni** | Choose an item. |
| **Contact address** | Click or tap here to enter text. |
| **Contact phone number** | Click or tap here to enter text. |
| **Contact e-mail address** | Click or tap here to enter text. |
| **Date(s) of the alleged event(s) about which you are complaining** | Click or tap to enter a date. |

## Details of your Complaint

You should set out the reason(s) why the complaint is being made; state who or what is being complained about; state the nature of the complaint; and the consequences that you believe you have suffered as a result.

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| Click or tap here to enter text.  |

**Note:** Supporting documentation may be submitted along with this form.

## Previous Action Taken

Please summarise any previous attempts to resolve your complaint informally. If no action has been taken, please leave this section blank.

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| **Date of discussion** | Click or tap to enter a date. |
| **Who did you discuss this with?** | Click or tap here to enter text. |
| **Why are you dissatisfied with the outcome?** | Click or tap here to enter text. |

## Outcome Sought to the Complaint

Please indicate the outcome you seek in making this complaint i.e. the rectification of your data, deletion of your data etc.

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| Click or tap here to enter text. |

**Note:** this is to help the University understand your complaint. The ultimate outcome may differ from this. You are asked to note that this is your preference only, and places no restriction on the outcome or the operation of the Complaints Procedure.

## Data Protection

I hereby consent for any relevant sensitive/confidential personal data held by the University to be made available to the Data Protection Officer for use as evidence or supporting documentation as appropriate.

I understand that as part of the investigation into my complaint, the Data Protection Officer may be required to discuss my complaint with other University staff and/or relevant third party processors, on a need-to-know basis.

**I confirm that this signature is of the individual making this complaint**

[ ]

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| --- | --- |
| **Signature** | Click or tap here to enter text. |
| **Date** | Click or tap to enter a date. |