THE UNIVERSITY OF EXETER CONFIDENTIAL

COMPLAINTS FORM - Request for Review

This form is intended for use with the Complaints Procedure which can be found at <http://www.exeter.ac.uk/staff/policies/calendar/part1/otherregs/complaints/> - please note the time constraints which apply to the complaints procedure. **This form is only to be used once you have completed the Informal Stage and Formal Stage of the Complaints Procedure**. You are required to complete all sections of the form. If you need help in completing this form or require advice you should contact the Students’ Guild Advice Unit (or FXU in Cornwall) the details of which can be found at <http://www.exeterguild.org/advice/> and <http://www.fxu.org.uk/advice_welfare/>

***This form should not be used for academic appeals.***

**Request for Review -** this form should be sent to the Student Cases Office, Compliance, Governance and Risk, The University of Exeter, Lafrowda House, St German’s Road, Exeter, EX4 6TL or emailed to studentcases@exeter.ac.uk

***Please keep a copy of this form for your records, plus any material you submit*.**

***ABOUT YOU***

|  |  |
| --- | --- |
| Name (in full) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Student ID number: |  |  Year of programme (1st, 2nd, etc) |  |

|  |  |
| --- | --- |
| College/Institution |  |

|  |  |
| --- | --- |
| Programme of study |  |

|  |  |
| --- | --- |
| Your contact address |  |

|  |  |
| --- | --- |
| Telephone no. |  |

|  |  |
| --- | --- |
| E-mail address |  |

***ABOUT THE FORMAL STAGE OF YOUR COMPLAINT***

|  |
| --- |
| Please confirm the date and name of the person who you raised the **Formal Stage** of your complaint with:Date - …………………………..Name - ………………………… |

|  |
| --- |
| Please confirm the date, and the name of the person, you had your **last meeting with** in relation to the Formal Stage complaint *(if applicable)*:Date - ………………………..Name - …………………………. |

|  |
| --- |
| Please confirm the date, and with whom, you had your **last correspondence** from the person who was dealing with this complaint at the Formal Stage *(if applicable):*Date - ………………………..Name - …………………………. |

***Please attach written confirmation that this matter has been raised informally.***

***ABOUT YOUR REQUEST FOR REVIEW OF YOUR FORMAL COMPLAINT***

For your complaint to be accepted you will need to demonstrate one or more of the following grounds. Please tick the box(es) that apply to the ground(s) under which you are submitting this complaint for review.

|  |  |  |
| --- | --- | --- |
| 6.3.1.a\* | That new and relevant information is available, that for good and independently verifiable reasons was not available at the Formal Stage, and now ought to be considered |  |
| 6.3.1.b | That at the Formal Stage the College or Service failed to follow the University’s procedures |  |
| 6.3.1.c | That the conduct of the investigation into your complaint was subject to bias and/or prejudice against you |  |
| 6.3.1.d | That the decision reached at the Formal Stage is one at which no reasonable body (properly directing itself, and taking into account all relevant factors) could have arrived at |  |

|  |
| --- |
| *\*If you have ticked a) i.e. that new and relevant information is now available at the Review Stage but was not available at the Formal Stage, you must explain why this is the case* |
|  |

|  |
| --- |
| *Describe here why you believe you have grounds for a Review of your Formal complaint, provide specific evidence with reference to a) b) c) or d) as ticked above* |
| (Please continue on a separate sheet if necessary) |

***DESIRED OUTCOME***

|  |
| --- |
| Please describe the action you would like to see taken in order to resolve the complaint to your satisfaction. |
|  |

***EVIDENCE***

|  |
| --- |
| Please list any documentary evidence attached and make sure you keep a copy:*(e.g. any correspondence, timeline, or other documentation related to your complaint)**You should ensure that all relevant evidence which you wish to be considered is submitted with your application.* |
|  |

***SUPPORT***

|  |
| --- |
| Please give the name of the student advisor, or other representative, who is helping you *(if applicable)* |
|  |

***DECLARATION***

I believe that the above information is accurate. I confirm that details of this complaint can be shared with relevant staff and my advisor or representative (if applicable).

Signature: …………………………………… Date: ...…………………………………………

August 2017