



Complaint Form

Doc. No	DCT2020FRM013R001
Rev. No	R001
Rev. Date	06.01.2020

COMPLAINT FORM

To be completed by learner / customer:

*First Name			
*Surname			
Date			
*Phone		*Email	
*Mobile		*Postcode	
*Address			

COMPLAINT CATEGORY:

Course Registration	<input type="checkbox"/>	Financial Issues	<input type="checkbox"/>
Training Materials	<input type="checkbox"/>	Examination Arrangements	<input type="checkbox"/>
Trainer conducts	<input type="checkbox"/>	Others:	

Provide a brief description of the complaint including dates and the names of those you dealt with. *Do NOT include any personal information.*

How can your complaint be satisfactorily addressed?

“Ege Consulting is committed to ensuring that interested parties privacy, such as learners, is protected and assured that it will only be used in accordance with Data Protection & Privacy statement.

Ege Consulting Data Protection & Privacy Policy

“Ege Consulting is committed to ensuring that no individual who raises a genuine complaint will be penalised. Members of staff involved in handling the various stages of a complaint must ensure, for example, that the action of raising a complaint does not influence the assessment of a student's papers. Initial feedback regarding the complaint will be sent within 48 hours. If the decision has to be made by Ege investigation and resolving will be released within 10 working days.”

Ege Consulting Complaints Policy



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COMPLAINT FEEDBACK

Student satisfaction Level:	1	2	3	4	5	6	7	8	9	10
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1= minimum satisfaction 10=maximum satisfaction

In which way you would like to receive the complaint feedback:

Email		Mail		Phone Call		Face to Face	
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Name Surname

Signature

Please email the completed form to info@egeconsulting.com

RECEIPT AND QUALITY CHECK

To be completed by Ege Consulting personnel

Complaint register no			
Name			
Position	Administrator	Involved Department	Founding Director
Signature			
Date			