**APPENDIX B Complaint Form to the Governing Body (Stage 4)**

Please complete and return to the Chair of Governors **only after stages 1, 2 nd 3 have been completed**. The Clerk will acknowledge receipt and arrange a meeting of the Complaints Committee. Please email your complaint to clerktogovernors@cowbridgecs.co.uk

|  |  |
| --- | --- |
| **Your name:** |  |
| **Pupil’s name:** |  |
| **Your relationship to the pupil:** |  |
| **Address:** |  |
|  |
|  |
|  |
| **Postcode:** |  |
| **Main telephone number:** |  |
| **Alternative telephone number:** |  |
| **Please give a brief outline of your complaint:** |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| **What action, if any, have you already taken to try and resolve your complaint.****(Who did you speak to and what was the response)?** |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| **What actions do you feel might resolve the problem at this stage?** |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| **Name:** |  |
| **Signature:** |  |
| **Date:** |  |