Paraparaumu College
Complaints Form

Complainant's Name:	
Contact Number(s)	
Date:	
Date of incident:	
Time of incident	
Number (date)	

Briefly explain the nature of the complaint: ***(please use factual information only and do not include hearsay. Please include name(s) of witnesses)***
Signature: ***Date:*** ***Parent / Staff Member / Student / Other***

Complaint received by:	***Signature:***
Date Acknowledged:	***verbal/written (circle one)***
Date Closed:	