

# COMPLAINT FORM



This form will help you to provide the Victorian Institute of Teaching (the Institute) with enough information to decide if it can investigate your complaint against a registered teacher. Please complete all the questions in this form.

If you want to complain about more than one registered teacher, please complete one complaint form for each registered teacher. Copies of the complaint form and any documents you provide to the Institute may be provided to the teacher you are complaining about.

This form and all attachments must be sent to:

**Victorian Institute of Teaching  
Professional Conduct Branch  
PO Box 531  
Collins Street West Vic 8007**

If you have any questions or require assistance in completing this form, please call our Administration Officer on:  
**03 8601 6171**

## YOUR PERSONAL DETAILS (THE COMPLAINANT)

Surname	First name
Other names	Mr / Mrs / Ms /Miss /Other (please circle)
Home address	
State	Postcode
Telephone (Home)	(Work)
Mobile	Email
Are these numbers for a telephone typewriter (TTY)? (A TTY is used for hearing or speech impaired people)	Yes / No (please circle)
Date of birth        /        /	
Interpreter required	Yes / No (please circle)
If yes, which language/dialect	
Postal address (If same as your home address, leave blank)	
State	Postcode

## DETAILS OF THE TEACHER YOU ARE COMPLAINING ABOUT

Teacher name	
School name	
School address	
State	Postcode
Telephone	

## DETAILS OF THE COMPLAINT

In the space below please:

- give the date(s) on which the complaint arose
- state what your particular complaints are (eg. conduct of the teacher, quality of the teaching, character of the teacher)
- describe the complaint (eg. what happened, where it happened, to whom it happened).

**If you do not have enough space, attach another page**



---

---

---

---

---

---

---

---

## FURTHER INFORMATION

**Witnesses:** If any other people can provide information about the complaint, please provide their names, contact details and what information they may be able to provide.

---

---

---

---

---



**Documents:** Attach photocopies of any documents you think are relevant to your complaint (eg. letters, school work). If you cannot provide the documents, please provide details of who has access to the documents, their contact details and what information they may be able to provide.

---

---

---

---

---

---

**Complaints to other persons:** If you have referred this complaint to another person (eg. teacher, principal, employer of teacher), who did you complain to and what was the outcome of the complaint?

---

---

---

---

---

**Sign and date the form**

Signature	Date	/	/
Print name			