



Client Feedback Form

Note: to lodge a complaint, please fill out a 'Client Complaint' form

South Regional TAFE encourages and welcomes your feedback. If you would like to provide feedback on our products or service, raise a concern or make a suggestion, please use this form. If you would like to make a suggestion about any aspect of the college's services, explain it to us below and we will examine the issue and provide you with a response. If you provide your contact details, we will acknowledge receipt of your feedback within 5 working days. You will then receive an initial response from the relevant manager within 10 working days.

If you need help in filling out this form, please call our Planning and Business Services Officer on 6371 3331.

You can find info on the SRTAFE Complaints Policy and Procedure on our website at:

<https://www.southregionaltafe.wa.edu.au/complaints-feedback>

Please tick the relevant boxes to help us direct your feedback for appropriate action:

Feedback type: Suggestion Compliment OSH issue

Is this issue about disability? Yes No

Are you a: Domestic student? International student? Staff member? Other?: _____

Are you under 18 years of age? Yes No

Your details (please use CAPITALS)

Date: _____

Title and name: _____
(Mr/Mrs/Ms/Miss)

Your postal address: _____
Street, suburb or town, and postcode

Email address: _____

Daytime contact phone number: _____ Student ID (if known) _____

Name of course you are enrolled in: (if applicable) _____

Provide a brief summary of your feedback, including any recommendations to improve our services:

Place your completed form in one of our feedback drop boxes on campus, scan and email to Feedback_combit@srtafe.wa.edu.au or hand to a member of staff

Office Use Only

Please place this form into a drop box or forward to the Planning and Business Services Officer at Feedback_combit@srtafe.wa.edu.au for registering into CoMBIT.

Feedback form initially received by: _____ Date: _____

Area/Campus: _____

Feedback entered into CoMBIT by: _____ Date: _____
(If different from above)

CoMBIT Number: _____

If any actions or replies to the client have been taken in response to this feedback before sending on to Planning and Business Services, please note here:

PBSO Reply to client: Email Letter Phone Verbal N/A (anonymous)

Date (if different from above): _____

Forwarded to (Manager):

Into Content Manager - Record Number:

Relevant documents

Client Complaints Policy and Procedure
Form: Client Complaint