



Complaints Form

Please complete this form in full and email it to **admin@itenz.co.nz**

Your full name:

.....

Your postal address:

.....

.....

Telephone numbers:

(mob).....

Are you a Domestic or International Student ?

The name and address of the education provider against which you wish to make a complaint:

.....

.....

.....

The course for which you are enrolled, with registration details: (including name of course, duration, start and end date)

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.....

Did the act(s) or omissions(s) about which you wish to complain take place within the last six months?

Give short details of your complaint, including relevant dates:

.....

.....

.....



Waver of Confidentiality

I, waive the duty of confidence the Provider
..... may owe me in respect of any information the
Quality Commission may request in order to consider the Complaint, and authorise
the production of that information.

Signed:

Date: