



## Complaint form

### Q1 - Student Details

|                 |  |
|-----------------|--|
| Title:          | Surname:   |
| First name:     | Middle name:   |
| Date of Birth:  | Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other                 |
| Postal Address: |  |
| Suburb:         | State: <span style="float: right;">Postcode:</span>  |
| Phone:          | Mobile:  |
| Email:          | Preferred contact: <input type="checkbox"/> Telephone <input type="checkbox"/> Email <input type="checkbox"/> Letter |

### Q2- Complaint Details

|  |   |  |   |
|--|---|--|---|
| Does your complaint relate to:   | <input type="checkbox"/> Registered Training Organisation | <input type="checkbox"/> Trainers / Instructors / Pilots | <input type="checkbox"/> Course content |
|  | <input type="checkbox"/> Flight Schedules                 | <input type="checkbox"/> Other _____                     |   |
| Course / Qualification name:   |   |  |   |
| Are you making this complaint on behalf of someone else? <input type="checkbox"/> Yes ( go to question 3) <input type="checkbox"/> No (go to question 4) |   |  |   |

### Q3 - Complaint Details

|   |   |
|---|---|
| Title:  | Surname:  |
| First name:   | Middle name:  |
| Date of Birth:  | Gender <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other |
| Postal Address:   |   |
| Suburb:   | State: <span style="float: right;">Postcode:</span>   |
| Phone:  | Mobile:   |
| Email:  |   |
| Have you been asked to make the complaint on this person's behalf?    | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Is this person aged 18 years and over?                                | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| If not aged over 18 years, are you the legal guardian of this person? | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Is this person an Aboriginal or Torres Strait Islander? (optional)    | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Preferred language _____  | Country of birth: _____   |
| Does this person require an interpreter?                              | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Does this person have a disability or special needs? (optional)       | <input type="checkbox"/> Yes <input type="checkbox"/> No  |

### Q4- Other information

|  |  |
|--|--|
| Is this person an Aboriginal or Torres Strait Islander? (optional) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Preferred language _____   | Country of birth: _____                                  |
| Does this person require an interpreter?                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Does this person have a disability or special needs? (optional)    | <input type="checkbox"/> Yes <input type="checkbox"/> No |

RTO Number: 40971  
 ABN: 74009 819 792  
 Office: (61 7) 3203 1777

Redcliffe Aero Club  
 1 Wirraway Drive, Kippa Ring, QLD, Australia, 4021  
 Email: info@redcliffeaeroclub.com.au





## THE REDCLIFFE AERO CLUB

### Q9 – Privacy information

The information on this form is being collected by Redcliffe Aero Club (RTO40971) for the purpose of managing and investigating your complaint. All personal information you provide will be handled in accordance with the privacy policy located on the company website. Redcliffe Aero Club will use relevant personal information for the purpose of assessing and/or investigating your complaint and responding to you. It may be necessary to disclose relevant personal information to the other person relevant to the investigation, including the person or entity you have complained about, so that they can provide a response. It may also be necessary to disclose relevant personal information to another Queensland Government agency or Australian Government agency so that agency can assist the Redcliffe Aero club with your complaint. If there is any information you do not wish an external party to receive, please let us know. If you are concerned about the privacy of the personal information supplied on this form please call Redcliffe Aero Club on 0732031777 0800-1700 AEST 7 Days a week.

### Q10 - Consent to investigate your complaint

Please complete the option that applies to you (Option A, Option B, Option C)

**Option A – The complaint relates to you and you are making the complaint on your own behalf**

I \_\_\_\_\_ (your name) give my consent for Redcliffe Aero Club representative/s to investigate my complaint concerning \_\_\_\_\_.

I further give my consent for Redcliffe Aero Club to contact any further Government departments they feel could assist/ contribute to resolving me complaint.

- Obtain and/or exchange documents and information containing my personal information, to any third party (including the person or entity I have complained about), that in the opinion of the Queensland Training Ombudsman, is necessary for the purpose of investigation of my complaint.
- Disclose and transfer my complaint and relevant personal information to another Queensland Government agency or Australian Government agency to investigate and respond to me, if in the opinion of the Queensland Training Ombudsman another agency is more appropriate to investigate and respond to my complaint

Signed:  Date:

**Option B – The complaint relates to a minor and you are lodging the complaint on their behalf**

\_\_\_\_\_ (NAME OF CHILD), and I am lodging this complaint on his/her behalf.

I give my consent for Redcliffe Aero Club representative to investigate the complaint concerning \_\_\_\_\_

I further give my consent for the Office of the Queensland Training Ombudsman to:

- Obtain and/or exchange documents and information containing my personal information, to any third party (including the person or entity I have complained about), that in the opinion of the Queensland Training Ombudsman, is necessary for the purpose of investigation of my complaint.
- Disclose and transfer my complaint and relevant personal information to another Queensland Government agency or Australian Government agency to investigate and respond to me, if in the opinion of the Queensland Training Ombudsman another agency is more appropriate to investigate and respond to my complaint

This consent remains valid until I give instructions, written or otherwise, that it is terminated.

Signed:  Date:

(YOUR SIGNATURE)

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Form Template: OFFICE OF THE QUEENSLAND TRAINING OMBUDSMAN COMPLAINT FORM – Downloaded and amended 26.02.2018



# THE REDCLIFFE AERO CLUB

**Option C – The complaint relates to another adult person (the complainant) and you are lodging the complaint on their behalf.**

Please note that both you and the complainant are required to sign.

I \_\_\_\_\_ (your name), acknowledge that I am lodging this complaint on behalf of \_\_\_\_\_ (name of complainant) and agree for Redcliffe Aero Club representative/s to investigate the complaint to communicate directly with me in relation to the complaint.

Signed:  Date:

The below Authority and consent Must be completed and signed by the complainant:

I \_\_\_\_\_ (name of complainant) authorise \_\_\_\_\_ (name of person lodging the complainant) to lodge this complaint concerning \_\_\_\_\_ on my behalf and give my consent for the Office of the Queensland Training Ombudsman to investigate my complaint.

I further authorise the Office of the Queensland Training Ombudsman to communicate directly with \_\_\_\_\_ (NAME OF PERSON LODGING THE COMPLAINT) in relation to my complaint.

I further give my consent for the Office of the Queensland Training Ombudsman to:

- Obtain and/or exchange documents and information containing my personal information, to any third party (including the person or entity I have complained about), that in the opinion of the Queensland Training Ombudsman, is necessary for the purpose of investigation of my complaint.
- Disclose and transfer my complaint and relevant personal information to another Queensland Government agency or Australian Government agency to investigate and respond to me, if in the opinion of the Queensland Training Ombudsman another agency is more appropriate to investigate and respond to my complaint.

Signed:  Date:

### Q11 – Before you submit your complaint

Before you send this form through to the Redcliffe Aero Club please check you have included:

- provided as much relevant information as possible.
- attached any supporting documentation.
- clearly identify your concerns.
- provide all necessary permissions for Redcliffe Aero Club to investigate.
- provide your desired outcome

### Q12 – Submit your complaint

Send your complaint to:

- RTO – 40971
- Redcliffe Aero Club – info@redcliffeaeroclub.com.au

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