



A copy of this form showing date of receipt must be given to the student

Dispute heard by [ person or panel ]

Name: (please print)

Signed:

Date:

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Section D: Outcome

### To be completed by the Training Manager

Complaint/concern/appeal resolved

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

The complaint/concern/appeal was not resolved. The next stage is to organise an appropriate external and independent agent to mediate between the parties. The student will need to attend mediation. The Training Manager will be in contact with details of date and time and location.

Outcome Implemented/notice of finding given to appellant in writing

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Student satisfied with outcome

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Recorded as completed in Corrective Action Record (form CG)

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Copy to be given to Student, once resolved.