

FORM B

LOCAL COMPLAINTS OFFICER

COMPLAINTS AND DISCIPLINE

To be completed by the Local Complaints Officer processing the complaint.

LOCAL COMPLAINTS OFFICER:

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CIRCUIT NO.:

DATE:

STRICTLY PRIVATE AND CONFIDENTIAL

WHAT ACTION HAVE YOU DECIDED TO TAKE?

Agreed Resolution

No Action

Referring to the Relevant Connexional Team Member

REASONS

Outline the reasons for your decision (whichever you have taken, even if no action).

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RECONCILIATION

Please outline any steps taken towards achieving reconciliation, whether this was successful or not, and details of help offered by the District Reconciliation Resource Group:

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