



Complaint or Appeal form

Learner/Client Name:		
Company name (if applicable):		
Telephone:	Mobile:	Email:
Postal address:		

Location/Department/Course/Staff Member (That the complaint or appeal relates to):

Please provide details below of your complaint and indicate what action you would like CEPUTEC to take, to rectify the situation. If necessary, attach extra pages of information.

Complaints: Your complaint will be referred to CEPUTEC's Operations Manager for action. You may be contacted for further information.

Appeals: Your appeal will be referred to the CEO of the Plumbing Industry Climate Action Centre (PICAC). You may be contacted for further information.

In both cases you will be advised of the outcome and reasons for the decision. All information that you supply will be dealt with in strict confidence.

Learner/Client Signature: _____ **Date:** _____



Office Use Only		
Date Received:	Received By:	
Action Taken:		
Reasons:		
Name:	Position:	Date:
Signed:	Signed (Assessor):	Date: