

Complaints and Appeals Form

Submit to info@ccm.vic.edu.au, addressed to CEO, or lodge with Student Support at reception. You may also raise a concern verbally or by email; staff can help record it.

CCM commences assessment within **10 working days** and finalises the matter as soon as practicable. You may use a support person. There is no charge for lodging, and independent appeal review is available at no or low cost. You will receive a written outcome with reasons and review options.

For an appeal, check the deadline in your decision notice. Relevant **international enrolment/reporting notices provide 20 working days to access internal appeal**. Ask Student Support if you need help.

A Your details

Full name

Date lodged

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Email

Phone

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Student ID if applicable

Course code and title if applicable

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Your relationship to CCM (select one)

☐ Prospective student ☐ Current student ☐ Past student ☐ Other — please specify: _____

B What are you lodging

Select one: ☐ Complaint ☐ Assessment appeal ☐ Other decision appeal

C Details and reasons

Explain what happened, relevant dates, people involved and any decision being appealed. For an assessment appeal, identify the unit, task, assessor and decision date. Attach more pages if needed.

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Full name to link both pages

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D Outcome sought

What would you like CCM to do to resolve the matter? Include any steps already taken.

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E Supporting evidence

List attached documents or other evidence, such as emails, notices, assessment feedback or receipts.

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F Support or accessibility needs

Tell us about a support person, interpreter, preferred contact method or other assistance you need.

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G Privacy and declaration

CCM uses this information to investigate and respond to your complaint or appeal. Information is handled securely and shared only as needed for fair investigation, independent review or legal obligations. Absolute confidentiality cannot be promised. You may request access or correction through Student Support.

I confirm that the information supplied is accurate to the best of my knowledge. I understand that making a complaint or appeal does not waive my legal or consumer rights.

Signature or typed name

Sign & Date

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Office use only

Received By

Date received

Assigned reviewer

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☐ Register updated ☐ Acknowledged ☐ Impartiality checked

Keep investigation, outcome, reasons, review options and student notification in the case record.