

**DONNINGTON PRIMARY SCHOOL**  
**Complaint Form B**

**Please complete and return to The Chair of Governors/c/o the school, who will acknowledge receipt and explain what action will follow.**

**Your name:**

**Pupil's name and class:**

**Your relationship to the pupil:**

**Address:**

**Postcode:**

**Day time telephone number:**

**Evening telephone number:**

**E-mail address:**

**Please give details of your complaint.**

**What action, if any, have you already taken to try and resolve your complaint.  
(Who did you speak to and what was the response)?**

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**What actions do you feel might resolve the problem at this stage?**

**Are you attaching any paperwork? If so, please give details.**

**Signature:**

**Date:**

**Official use**

**Date acknowledgement sent:**

**By whom:**

**Complaint referred to:**

**Date:**