Appeals Form



This form should be completed by parents/carers, students, school and AIIU staff, host families and/or affiliated third-party partner organisations to appeal any decisions by AIIU, in regard to its Student Exchange Program.

Notes about this form

- The AIIU Appeals Policy provides an overview of the steps that AIIU staff, host families and/or affiliated organisations can take to deal with appeals relating to AIIU, in regard to its Student Exchange Program.
- This form should be read in conjunction with the AIIUP Appeals Policy.
- · This form should be used to appeal the outcome of a formal complaint.
- The complainant should complete the form in English and provide all necessary information requested. The completed and signed form, and any relevant supporting documentation, should be submitted to the General Manager, AIIU at: **enquiries@aiiu.com.au**
- The complainant has the right to contact the relevant State Regulation Authority at any time regarding a complaint. The Regional Manager, AIIU will inform the exchange student that they can contact the relevant State Regulation Authority if the exchange student or parent/guardian is concerned about AIIU's conduct. This will be reiterated by the Local Coordinator. The relevant State Regulation Authority may suspend or cancel AIIU's registration as a secondary student exchange organisation; and that the complaints handling and appeals process described in AIIU's policies and procedures does not prevent an exchange student from exercising the student's rights to other legal remedies.
- The relevant State Regulation Authority, in turn, will investigate the complaint, specifically in relation to AIIU's compliance with the Student Exchange Organisation Standards and Child Safe Standards (CSS).

Appellant to complete this section

Appellant Details

1	Appellant first name	
2	Appellant last name	
3	Relationship to student/s (if applicable)	
4	Address	
5	Telephone number/s	
6	Email/s	

Student Details

Please provide the student/s details below (if applicable).

7	Student ID	Student 1 - Full name	Year level
8	Date of birth	School	

Additional Support

9. Please advise us if you require a translator to assist with any phone calls that may take place.

10	Yes	No
11	Language	
12	Dialect	

Appeal Details

Please explain why you believe that AIIU has made an error in the original complaint outcome or a formal decision in the space provided below. Attach extra pages, if required. Please also ensure that you attach copies of any relevant supporting documents.

Appeal Outcome

Please outline what outcome you are seeking below. Attach extra pages, if required. **Note:** Stating your desired outcome here does not guarantee that it will be granted, even if your appeal is successful.

Signature:	
Date:	