



COMPLAINT FORM

This form will help you to provide the New Zealand Teachers Council (the Council) with enough information to decide if it can investigate your complaint against a registered teacher. Please complete all the questions in this form.

If you want to complain about more than one registered teacher, please complete one complaint form for each registered teacher about whom you wish to complain. Copies of the complaint form and any documents you provide to the Council will be provided to the teacher you are complaining about.

You should make your complaint to the professional leader or employer of the teacher before contacting the Council. The Council can only consider your complaint if the board was unable to deal with the complaint satisfactorily.

This form and all attachments must be sent to:

Senior Advisor: Teacher Practice
New Zealand Teachers Council
PO Box 5326
Wellington

If you have any questions or require assistance in completing this form, please phone the Council on 04 471 0852.

YOUR PERSONAL DETAILS (THE COMPLAINANT)

Form fields for personal details: Surname, First name, Address, Telephone (Home), Mobile, (Work), Email address, Mr / Mrs / Ms / Miss / Other (please circle)

DETAILS OF THE TEACHER YOU ARE COMPLAINING ABOUT

Form fields for teacher details: Teacher's full name, School/Centre name, School/Centre address, Teacher's address (if known), Registration number

DETAILS OF THE COMPLAINT

In the space below please:

- give the date(s) on which the complaint arose
• state what your particular complaints are (eg conduct of the teacher, quality of the teaching, character of the teacher)
• describe the complaint (eg what happened, where it happened, to whom it happened).

If you do not have enough space, attach another page

Multiple horizontal lines provided for additional complaint details.

