



**North Nottinghamshire**  
— C O L L E G E —

## **COMPLAINTS FORM**

North Nottinghamshire College prides itself on the level of service it offers to students, parents, employers and the wider community.

The College is committed to dealing with your complaints efficiently.

Please complete this form (or ask someone to do it for you) and return to: -

Carole Gardner  
Quality and Standards Unit  
North Nottinghamshire College  
Carlton Road  
Worksop  
Nottinghamshire  
S81 7HP

Phone: 01909 504504

Fax: 01909 504505

Email: [quality@nnc.ac.uk](mailto:quality@nnc.ac.uk)

You can fill this out with someone else.

Name .....

Address .....

.....

Postcode .....

Phone number .....

Student / Parent / Employer / Other (please state) .....

Date of complaint .....

What is your complaint?

Have you discussed this complaint with anyone in the College? Yes / No (delete as appropriate)

If 'Yes', who .....

What would you like to happen now?

Signed: ..... Date: .....

For College Use Only:

Complaint Ref no

Date

Category

Date Resolved

Notes

---

### NNC Complaints Equality and Diversity Monitoring Form

North Nottinghamshire College is committed to the development of positive policies to promote equal opportunities for all people, regardless of race, nationality, ethnic origin, creed, disability, gender, marital status, age or sexuality. The information below is confidential and will be used only to monitor the effectiveness of this policy.

**Gender:** Male  Female

**Nationality:**

**Age:** 16-25  26-35  36-45  46-55  56 and over

**Ethnic Origin:** I consider my ethnic origin to be:

ASIAN/ASIAN BRITISH	MIXED	WHITE	BLACK/BLACK BRITISH
Bangladeshi <input type="checkbox"/>	White/Asian <input type="checkbox"/>	British <input type="checkbox"/>	African <input type="checkbox"/>
Pakistani <input type="checkbox"/>	White/Black Caribbean <input type="checkbox"/>	Irish <input type="checkbox"/>	Caribbean <input type="checkbox"/>
Indian <input type="checkbox"/>	White/Black African <input type="checkbox"/>	Other <input type="checkbox"/>	Other <input type="checkbox"/>
Chinese <input type="checkbox"/>	Other Mixed <input type="checkbox"/>		
Other <input type="checkbox"/>			

**Any other not already mentioned**

**Disability:** Do you consider yourself to have a disability? Yes  No

If **Yes**, are you: Registered  Non-Registered

**Please complete this form and return it with your complaints form**

The information from this application form will be stored on a computer system and used in accordance with the Data Protection Act 1984 and 1998.

For College Use Only:

Compliment / Suggestion Ref no _____
Date _____
Forward to _____
Date _____



### COMPLIMENTS / SUGGESTIONS FORM

North Nottinghamshire College prides itself on the level of service it offers to students, parents, employers and the wider community.

The College welcomes your suggestions as to how we can improve our services and also we like to know when things go right.

Please complete this form (or ask someone to do it for you) and return to: -

Carole Gardner  
Quality Unit  
North Nottinghamshire College  
Carlton Road  
Worksop  
Nottinghamshire  
S81 7HP

Phone: 01909 504504

Fax: 01909 504505

Email: [quality@nnc.ac.uk](mailto:quality@nnc.ac.uk)

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Phone No \_\_\_\_\_

Student / Parent / Employer / Other (please state)

\_\_\_\_\_

Date \_\_\_\_\_

Compliment / Suggestion \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What would you like to happen now? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_