



# Local Authority Services National Training Group

Ballincollig	
Ballycoolin	
Castlebar	
Roscrea	
Stranorlar	

## Learner Complaint

<b>F07</b>
<b>V1.1</b>

Learner Name		Employee/ID No	
Course Title			
Trainer's Name		Venue	
Date			
Employer			

**Please state nature of complaint**

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**What supporting evidence is offered**

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<b>Name of person first contacted</b>		<b>Date</b>	
<b>Urgent</b>		<b>Ongoing</b>	
	<b>An isolated incident</b>		<b>Other (please specify below)</b>

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<b>Learner Signature</b>		<b>Date</b>	
<b>Received RTC Manager</b>		<b>Date</b>	

**For Office use only:**

**Details of investigation**

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**Details of action taken**

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<b>RTC Manager Signature</b>		<b>Date</b>	
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