

#### **COMPLAINT REFERRAL FORM**

## Office of the University Ombud

Block 011 L Block Westville Campus

E-mail: ombud@ukzn.ac.za

For office use only:
File Number
Date received
Mode of delivery

Before you complete this form, please read the Terms of Reference for the University Ombud, available on <a href="http://corporategovernance.ukzn.ac.za/business/ombud/Terms-of-Reference.aspx">http://corporategovernance.ukzn.ac.za/business/ombud/Terms-of-Reference.aspx</a>

PARTY REFERRING THE COMPLAINT				
If you are a parent referring the matter on behalf of the student please also complete				
Section B				
Full names				
Staff number/ student				
number/ ID Number				
Physical Address				
	Postal Code			
College/Division				
Campus				
Contact numbers	Tel:	Cell:		
E-mail address				

#### Office of the Ombud

Postal Address: Private Bag X54001, Durban 4000, South Africa

Website: www.ukzn.ac.za



### **SECTION B**

Who is involved in the matter and how can we contact them?

(If there is more than one party please attach a separate page with details of all parties.)

Details of the Student				
Full names				
Staff number/ student number/ ID Number				
Physical Address				
	Postal code			
College/Division				
Campus				
Position of Authority				
Contact numbers	Tel:	Cell:		
E-mail address				
SECTION C				
Details of the complaint:				
Explain the nature of the problem: (If the space provided below is insufficient, please use a separate piece of paper and also attach any additional information that is relevant to the complaint).				
What date did the event leading to the complaint happen?				

# Office of the Ombud- Complaint Referral Form

What steps have you taken to resolve the problem internally and who have you contacted?
If you have not requested assistance from internal conflict resolution forum, please gie reasons for contacting the Ombud in the first instance.
Are there any pending legal proceedings relating to the complaint? If YES please give details:
What solution do you require?
Do you consent to disclosure of the information pertaining to the complaint to the other parties who are involved in this matter? If there is some information that you wish to keep as confidential please specify:
Signature of the person referring the complaint:
Date