

**Stage 2 Group Complaint Form**

Your experience at the University of Limerick (UL) is of paramount importance to us, and we are committed to providing a high-quality experience at all times and in all areas and activities. The University recognises that, from time to time, students may have legitimate complaints about its provision, facilities, services and staff. We aim to ensure that student complaints are treated seriously and dealt with promptly, fairly and consistently. In addition, to help us improve our services and enhance the student experience, we aim to learn from the outcomes of investigations into complaints.

This form is designed for use with Stage 2 of UL’s Student Complaints Policy and Procedures. The document can be found at <https://www.ul.ie/provost/functions-processes/student-complaints>.

Please ensure that you have read and understood the Student Complaints Policy and Procedures before completing this form.

You should also check that this is the correct procedure to use. The complaints procedure does not deal with academic judgement. You may find that the academic appeals procedure is more suitable (as specified in the [Handbook of Academic Regulations and Procedures](https://www.ul.ie/policy-hub/policies)).

**You are advised to consult with your students’ union before completing this form.**

Except in exceptional circumstances, you are expected to attempt to resolve matters that you are concerned about informally before submitting a formal complaint. An informal approach should be made to the person responsible for the service in question, such as a head of department or the manager of a service unit.

When you have completed this form, please return it and any supporting documentation to: Complaints Discipline & Vetting Unit

Office of the Provost & Deputy President

A1-067, Main Building
University of Limerick

Limerick V94 T9PX

Ireland

or by email to ulstudentcomplaints@ul.ie

# SECTION 1A – SPOKESPERSON AND CORRESPONDENT DETAILS

|  |  |
| --- | --- |
| **First name(s)** |  |
| **Family name** |  |
| **UL ID number** |  |
| **Programme of study** |  |
| **Faculty/Faculties** |  |
| **Address for correspondence**  |  |
| **Daytime phone number** |  |
| **Email address**Your UL email address will be used unless otherwise requested. |  |

**SECTION 1B – MEMBERS OF GROUP COMPLAINT DETAILS**

To proceed as a group complaint, UL requires written confirmation from each complainant (listed below) that they wish to nominate the student listed in Section 1A as their spokesperson and correspondent. This written agreement must be in the form of an email to ulstudentcomplaints@ul.ie and must come from the UL email address of each student who wishes to be part of the group complaint. The email must include a statement that the student wishes to nominate the student listed in Section 1A and they must include the nominated spokesperson and correspondent’s name and ID number. Please add more rows to the table below if required.

|  |  |  |  |
| --- | --- | --- | --- |
| **Full name** | **UL ID number** | **email address** | **Programme of study** (required only if it differs from Section 1A) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# SECTION 2 – THE COMPLAINT

***Please set out below the key points of the complaint.***

|  |
| --- |
| ***NB: The complaint must be summarised here even if you attach other documents.*** ***Do not expand the box beyond this page.*** |
|  |
| **What documented evidence is available to support your complaint?** NB: All evidence listed here must be submitted at the same time as the complaint – see 8.5 of the policy) |
| ***Type of evidence*** | ***Date*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Who was approached to resolve your complaint informally? What action, if any, was taken to remedy your complaint?** |
| Name |  | Action taken |  | Approx. date |
|  |  |  |  |  |
| **Why are you dissatisfied with the informal outcome?** |
|  |
| **Who else was the complaint discussed with?** |
| Name |  | Dept/Admin Office/Faculty |  | Approx. date |
|  |  |  |  |  |
| **How do you think the complaint could be resolved to your satisfaction?** |
|  |

# SECTION 3 – TIME LIMITS

|  |
| --- |
| The completed complaints form should be lodged with Student Complaints, Office of the Provost & Deputy President within the time limits detailed in the Student Complaints Policy and Procedures (no later than 90 days after the incident has occurred). An extension of these time limits will be possible only in exceptional circumstances, such as illness. If the complaint has been made outside of these time limits, please provide below details for the reason for this and provide evidence, where available. |
|  |

# SECTION 4 – SPOKESPERSON AND CORRESPONDENT DECLARATION

|  |
| --- |
| **Please sign and date the form after completing the following checklist:** Have you selected the grounds you are complaining under?  Have you included all documentary evidence to be considered? Have you explained why you are submitting this request? Is your request being submitted within the deadline? If not, please explain why. Please sign below to confirm that the information you have provided is accurate to the best of your knowledge and to indicate your consent for the information provided to be used as detailed above. |
| Signed1: |  | Dated: |  |

*Note 1: Only a hard copy form needs to be signed by you. If you submit the form by email, you must send it from your UL email account – doing so will be taken as the equivalent of signing the form.*