



OTAKIRI SCHOOL

Registration of a Concern

A member of Senior Staff will complete this form for you during a brief interview if you wish

Person Raising The Concern

- School Parent
- Community Member
- Staff Member
- Student
- Professional Visitor
- Other _____

Contact Details

Name _____	
Telephone Contacts	Day
_____	Evening
Postal Address	_____
_____	_____

Nature of the Concern

- Confidential
- Classroom Matter
- Playground Matter
- Staff Issue
- Health & Safety
- School Management
- BOT Policy & Practice
- Student Welfare
- Other _____

Please Outline Your Concern Briefly

Please name any staff already involved in the matter leading to your concern
eg Duty Teacher

Who do you like to have hear your concern and facilitate a resolution?

- Class Teacher Please Name _____
- Principal – Michael Mokai
- Senior Staff Member other than the Principal Please Name _____
- Board of Trustees Chairperson
- Board of Trustees Member Other than the Chairperson Please Name _____
- Board of Trustees Sub Committee Which One? _____
- Student Council at their next Meeting
- Full Board of Trustees at their next Meeting
- Other _____

Please Place your completed copy of this form in the envelope provided, address it to the person/group that you wish to have receive it, and hand it in to the school office.

What action do you feel would solve this matter for you?

PLEASE HAND THIS FORM IN TO THE OFFICE WHEN COMPLETED. Signed _____

Depending on the scale of your concern, we expect to clear matters that do not involve the Board of Trustees within 5 school days. If your concern does require BOT input then you will receive notification of what is happening next within 1 school week of registering your concern. **The Office will copy this form for you.**