



## APPEALS AGAINST THE DECISION TO DISAPPLY YOUR COMPLAINT

For Internal Use Only

We must receive your appeal within 29 days of the date of the letter telling you about the Decision to disapply your complaint. This includes the time your appeal spends in the post.

Section 1: Your details	
<b>Personal details:</b>	
Title:	Mr <input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify)
First name:	
Surname:	
Date of birth	
<b>Address details:</b>	
House/flat number:	
House/building name:	
Street:	
Town:	
County:	
Postcode	
<b>Contact details:</b>	
Email address:	
Main contact number:	
Alternative contact number:	

Doing the right thing



**Section 2: Would you like someone to act on your behalf?**

*Please tick as appropriate:*

Yes I would like someone to act on my behalf: <input type="checkbox"/>	No, I don't want someone to act on my behalf: <input type="checkbox"/>
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*If you selected yes, please provide the contact details of the person acting on your behalf:*

**Personal details:**

Title:	
First name:	
Surname:	
Date of birth	

**Address details:**

House/flat number:	
House/building name:	
Street:	
Town:	
County:	
Postcode	

**Contact details:**

Email address:	
Main contact number:	



**Section 3: Your appeal details**

If you received a letter from the appropriate authority telling you about their decision to disapply your complaint, please give the date of that letter:

Date you made your complaint:

Appropriate authority reference number (if known)

**What was the reason(s) given to disapply? Please give one or more of the below (if known):**

- The complaint is out of time – more than 12 months have passed between the incident and the complaint and because of the delay injustice would be caused
- The matter is already subject to a complaint – the matter has already been raised as a complaint by the same person, or someone acting on behalf of them
- The complaint is anonymous
- The complaint is repetitious
- It was considered not reasonably practicable to proceed – for example if the Complainant refuses to make a statement or assist with the investigation
- The complaint was considered to be vexatious, oppressive vexatious and/or oppressive (this means the complaint is without foundation and could cause harsh and/or unfair treatment of the person complained about)
- Or an abuse of procedures – this means when the complaints process has been misused or unfairly influenced

**Please explain why you want to appeal based on the reason(s) selected above (continue on a separate sheet if necessary):**

Blank area for explanation of appeal reasons.



**If you have a letter from the appropriate authority about their decision to disapply the investigation into your complaint, or any other documents to support your appeal; please attach them to this form when submitting your appeal.**

**Section 4: Confirmation and signature**

Please provide your signature to confirm the information you have provided is correct:

Signature:

Date: