



STRATWORTH
UNIVERSITY

Complaints Form

If at any time you have a concern and would like to make a complaint regarding any aspect of your Stratworth University course, you are welcome to file a complaint with the Learner Complaints team. To do so, please complete this form thoroughly providing comprehensive details regarding your complaint within 60 working days from when the incident or observation occurred. Once received, the team will review your complaint and provide a decision within 10 working days.

Please complete this form if you wish to make a formal complaint about a Stratworth University CPD training program you have attended. All complaints will be treated confidentially and investigated thoroughly.

Section 1: Personal Details

- Full Name:
- Email Address:
- Phone Number:
- Program Name:
- Program Date(s):
- Date of Complaint:

Section 2: Complaint Details

(a) Please select the category that best describes your complaint (You may select more than one):

Content/Curriculum: (e.g., inaccurate information, irrelevant content, poor organization)

Delivery/Instruction: (e.g., ineffective teaching methods, poor presentation skills, lack of engagement)

Materials/Resources: (e.g., inadequate materials, poor quality handouts, technical issues)

Facilities/Venue: (e.g., uncomfortable environment, inadequate equipment, accessibility issues)

Administration/Organization: (e.g., poor communication, scheduling issues, registration problems)

Other (Please specify):

(b) Please provide a detailed description of your complaint. Be specific and include relevant dates, times, and names of individuals involved, if applicable. Attach any supporting documentation (e.g., screenshots, emails, photos) if available.

A large, empty rectangular box with a black border, intended for the user to provide details about the complaint.

(c) What outcome are you seeking to resolve this complaint? (e.g., refund, apology, re-training, changes to future programs)

A large, empty rectangular box with a black border, intended for the user to describe the desired outcome for resolving the complaint.

Section 3: Declaration

I declare that the information provided in this complaint form is true and accurate to the best of my knowledge.

- Signature:

- Printed Name:

Submission Instructions:

Please submit this completed form by email: complaints@stratworthuniversity.org

Contact Information:

If you have any questions regarding the complaint process, please contact us at complaints@stratworthuniversity.org

Thank you for taking the time to provide us with your feedback. We are committed to providing high-quality CPD training programs.

This form has been reviewed, approved & authorized by:

Name: Prof. Dr. Lawrence Emeagwali

Position: Company Director

Date: December, 2024

Form Review Date: December, 2027