



Date Student ID

Name

Mailing Address Phone Number

Email

Please identify as a complaint or grievance and then summarize complaint or grievance.

Please identify the person(s) involved.

Describe what happened and when it happened. Attach additional pages if needed.

What remedy or corrective action are you requesting?

Please provide the names of other persons who will verify or support your statements. (Attach additional pages if needed):

Name _____ Phone/email _____

Name _____ Phone/email _____

Student Signature

Date

Chief Academic Officer

Date

For office use only

Actions taken:

Complainant/Grievant Notified: Date _____ Method _____