

STUDENT COMPLAINT REPORT FORM

The purpose of this form is for students to report Complaints to the College, so that an acceptable resolution can be established. If this complaint relates to an instructor, approach your instructor about the issue first before filing the complaint form.

Date of Complaint: _____

Student Name	Student ID
Address	City
Telephone #	Email

Instructions:

- ✓ Briefly identify the reason you are submitting your Complaint. Please use the back of this form if more writing space is needed.
- ✓ Attach supporting evidence, if applicable.
- ✓ Submit this form and supporting evidence to the Director's Assistant/Academic Process Coordinator.

Context of the Feedback
<p>If your Complaint involves a class please indicate the:</p> <ul style="list-style-type: none"> • name of the class, the time, the campus and the instructor <p>If it involves an employee please indicate the name and position of that person.</p> <p>If it involves an IT issue please indicate the specific location and device where the issue occurred.</p>
<p>Describe your Complaint in detail (please attach extra pages if needed):</p>
Student Signature Date

OFFICE USE ONLY <i>(Please do not write in this area)</i>		
Action taken:		
Comments:		
Name (please print)	Signature	Date Signed
		Date Student Notified