



## Student Complaint/ Suggestion Form

Student Name: \_\_\_\_\_ Student ID# \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email address: \_\_\_\_\_

Complaint/ Suggestion Summary - Please use the space below or attach additional information as needed to describe the complaint/ suggestion. The statement should include a description of the events or circumstances upon which the complaint/ suggestion is based. All supporting documentation, if available, should be attached. Complaints/ suggestions may be submitted electronically.

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\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date Submitted

This completed form and supporting documentation should be returned to the Department of Examinations and Academic Affairs. An academic officer will attempt to resolve the matter or will forward complaints to appropriate officials according to the nature of the complaint/ suggestion..

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*For Official Use Only*

Date Complaint Received: \_\_\_\_\_

Actions Taken by College Official(s): \_\_\_\_\_

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Outcomes and Follow-up Action as needed: \_\_\_\_\_

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\_\_\_\_\_  
Signature - Official

\_\_\_\_\_  
Date