 **ACADEMIC DIVISION STUDENT COMPLAINT FORM**

**INSTRUCTIONS*:*** **This form is completed by the Department Chair or Division Dean (or their designees).** The form is used to **document** the process and outcome regarding resolution of a*student’s complaint that is of an academic nature with a faculty member in whose class the student is currently enrolled*, in accordance with the Student Academic Complaint Procedure. This form is used after the student has attempted to resolve the complaint directly with the faculty member.

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| **STUDENT INFORMATION** | | |
| **Student Name:** | | **Method of Contact**:  in person  phone  email |
| **LOLA #:** | **Phone:** | **Email:** |
| **Course, Number, and Section:** | | |
| **Instructor:** | | |
| **Date of Complaint:** | | |
| **Description of Complaint:** *(Write a Summary of the Complaint. Indicate if attachments are included.)* | | |
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| **Resolution Being Sought:** *(Describe the resolution/remedy being sought.)* | | |
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| **DEPARTMENT CHAIR OR DESIGNEE COMPLETES THIS SECTION** | | |
| **Resolution Process/Outcome Statement:** *(Describe resolution process, next steps offered to student, and outcome.)* | | |
|  | | |
| **DIVISION DEAN OR DESIGNEE COMPLETES THIS SECTION (IF APPLICABLE)** | | |
| **Resolution Process/Outcome Statement:** *(Describe resolution process, next steps offered to student, and outcome.)* | | |
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**DISPOSITION** (Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_):  
  
\_\_\_\_ Complaint resolved at Department Chair Level. *Dept. Chair/designee’s initials: \_\_\_\_\_\_\_\_*

\_\_\_\_ Complaint resolved at Division Dean Level. *Division Dean/designee’s initials: \_\_\_\_\_\_\_\_\_\_*

\_\_\_\_ Complaint not resolved. Student referred to College Level process. *Division Dean/designee’s initials: \_\_\_\_\_\_\_\_\_\_*

Form 2530/005 (1/19)