



## Formal Complaint Form for Students

\_\_\_\_\_  
Name of Student Filing Complaint

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Signature of Student Filing Complaint

\_\_\_\_\_  
Student Phone Number

\_\_\_\_\_  
Student Mailing Address

\_\_\_\_\_  
Student E-mail Address

\_\_\_\_\_  
Student ID Number

**DESCRIPTION OF COMPLAINT (DATE, PLACE, TIME, DETAILS):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ATTEMPTS MADE TO RESOLVE AS AN INFORMAL COMPLAINT:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**STATEMENT OF DESIRED OUTCOME:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

**Administrator receiving complaint completes items below this line.**

**Date Received:** \_\_\_\_\_

**ACTION TAKEN:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Administrator Taking Action

\_\_\_\_\_  
Date Response Sent to Student

\_\_\_\_\_  
Signature of Cabinet Officer

\_\_\_\_\_  
Date Copy Sent to Cabinet Officer

\_\_\_\_\_