



## STUDENT GENERAL COMPLAINT FORM

**\*\*PLEASE PRINT\*\***

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or P.O. Box City Zip Code

ID# \_\_\_\_\_ Telephone No. \_\_\_\_\_

DATE MOST RECENTLY ENROLLED AS A STUDENT: \_\_\_\_\_

I WISH TO COMPLAIN AGAINST: \_\_\_\_\_

Name of person, college, program, or activity: \_\_\_\_\_

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

Please describe the incident, the participants, the background of the incident and any attempts you have made to solve the problem. Be sure to note relevant dates, times, and places.

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Date of Alleged Incident: \_\_\_\_\_

If there is anyone who could provide more information regarding this issue, please list names, addresses, and phone numbers.

NAME

ADDRESS

PHONE NUMBER

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FORMS: STUDENT COMPLAINT FORM 5/2010