

STUDENT COMPLAINT FORM

Please try to resolve a concern first by using a direct and informal approach to the individual concerned wherever possible.

If a complaint includes allegations about another individual, that person may be provided with a copy of all relevant documentation, including a copy of the completed complaint form.

Completed student complaint forms are to be sent to the Dean of the Seminary in a sealed envelope, or by email, marked "Student Complaint, Confidential".

YOUR DETAILS

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address

City State ZIP Code

PERMANENT ADDRESS

Address: _____
Street Address

City State Zip Code

Telephone Cell Phone Email

CURRENT ADDRESS (IF DIFFERENT FROM ABOVE)

Address: _____
Street Address

City State Zip Code

Telephone Cell Phone Email

MAIN AREA OF STUDY

Degree Program: _____ Non-Degree: _____

STUDENT COMPLAINT FORM CONTINUED...

PLEASE DESCRIBE YOUR COMPLAINT (ATTACH ADDITIONAL PAGES IF NECESSARY).

WHAT HAVE YOU DONE TO ADDRESS YOUR COMPLAINT?

WHAT OUTCOME ARE YOU SEEKING?

Student Signature: _____

Date: _____

For Office Use Only Date Received:
