

## Student Grievance Record

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This form is to be completed for all student grievances not designated as a concern.

- Notes:
- (1) This form is not to be used for claims of sexual harassment (refer to Sexual Harassment Policy). For issues regarding discrimination refer to Equal Opportunity Policy.
  - (2) If space is insufficient additional details are to be attached.
  - (3) Copies of all associated documentation are to be attached.

Name of student: _____	ID number: _____
Name of staff member/s completing this report: _____	
Course: _____	
Summary of grievance: _____	
_____	
_____	
_____	
_____	
_____	
Proposed resolution / Action taken: _____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	

Associate Director    Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_    Date: \_\_\_\_\_