



Office of the Vice President of Student Services

1000 W. Foothill Blvd., Glendora, CA 19741-1885 • (626) 914-8532, Student Services Building, SS 218

STUDENT COMPLAINT FORM

Student Name:

Student ID Number:

Mobile Phone:

Street Address:

City:

Email:

Home Phone:

Zip Code:

NOTE: If you have a complaint relating to **course grades** or the **right to free expression**, please complete the [Student Grievance Form](#).

Please explain below or attach a type-written, detailed explanation of your complaint. Explain as clearly as possible why you are filing a complaint. Be sure to include all the necessary information (including names, dates, etc.) to support your statements so that your complaint can be appropriately addressed. Please complete and submit this form to the office or department where the incident occurred.

Please type the name of the employee that is involved in your complaint (if applicable):

Employee Name:

Department/Office:

Date of Incident:

Department Phone:

Desired Outcome

STUDENT SIGNATURE: _____ **DATE:** _____



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FIRST LEVEL – FOR OFFICE USE ONLY

Date Received:

Result/Outcome:

- Informal resolution, met with student
- Forwarded to instructor for resolution
- Student did not request action, just be heard
- Complaint involved grades and/or freedom of expression. Student was directed to follow the Grievance process.
- Complaint involved sexual, harassment, discrimination, violence, or stalking and was forwarded to the Title IX Coordinator in Human Resources on:
- Other (explain):

Manager Name:

Extension:

Signature:

Date:

IF necessary, forward information to second level administrator (i.e. Dean or Vice President)

SECOND LEVEL – FOR OFFICE USE ONLY

Date Received:

Result/Outcome:

Name:

Extension:

Signature:

Date: