

## Universal Student Complaint/Appeal Form

**Instructions:** Complete all sections below. Attach all appropriate documentation, if any, that supports your complaint and/or appeal.

\_\_\_\_\_

Last Name

\_\_\_\_\_

First Name

\_\_\_\_\_

MI

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

NCSC Email Address

\_\_\_\_\_

NCSC Student Number

\_\_\_\_\_

Phone Number

What factors or extenuating circumstances beyond your control contributed to the problem or issue? Your answer should be as detailed as possible. Please type or write neatly. If more space is needed, please attach additional pages.

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Please explain your requested solution to the problem or issue. Your explanation should be as detailed as possible. Please type or write neatly. If more space is needed, please attach additional pages.

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I have read and understand all instructions and the information submitted is correct and complete.

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

**For College Use Only**

1. Supervisor of Policy: \_\_\_\_\_
2. Date of meeting with supervisor: \_\_\_\_\_
3. Resolution of the meeting:
  - a. \_\_\_\_\_ Resolution achieved with supervisor
  - b. \_\_\_\_\_ Appeal submitted to investigating supervisor. Date: \_\_\_\_\_
  - c. Supervisor's Comments, Signature, and Date  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
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4. Investigating Supervisor: \_\_\_\_\_
5. Date of review by investigating supervisor: \_\_\_\_\_
6. Resolution of the Investigation and Review:
  - a. \_\_\_\_\_ Supervisor's decision upheld
  - b. \_\_\_\_\_ Supervisor's decision overturned
  - c. \_\_\_\_\_ Appeal submitted to investigating supervisor. Date: \_\_\_\_\_
  - d. Investigating Supervisor's Comments, Signature, and Date  
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7. President/Vice President Review \_\_\_\_\_
8. Date of review by investigating supervisor: \_\_\_\_\_
9. Resolution of the Investigation and Review:
  - a. \_\_\_\_\_ Investigating Supervisor's decision upheld
  - b. \_\_\_\_\_ Investigating Supervisor's decision overturned
  - c. President/Vice President Comments, Signature, and Date  
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10. Upon final resolution, copy to Vice President for Academic and Student Services (F-7).