

ALABAMA COMMUNITY COLLEGE SYSTEM

STUDENT COMPLAINT FORM



Full Name _____

A Number _____

Address _____

City

State

Zip Code

Phone _____ Alternate Phone _____

E-mail _____

Institution Name _____

Campus _____

Program of Study _____

Last Date of Attendance _____

Semester & Year of Incident _____ Location of Incident _____

Did you follow the Institution's grievance procedure to resolve your complaint?

No

If no, stop here and refer back to the institution's complaint/grievance process. Please exhaust all steps in the institution's complaint/grievance process before filing a complaint with the System Office of the Alabama Community College System.

Yes

Please continue with this form.

How did you contact the Institution to resolve your complaint? Please specify who was contacted and on what date(s), if possible.

Date _____ Phone Call _____

Date _____ In Person _____

Date _____ Letter _____

Date _____ E-mail _____

Other _____

(Continue to next page)

What outcome did you seek from the Institution?

Have you contacted another agency or organization about the matter?

Yes

No

If yes, please give name of agency. _____

Have you contacted an attorney?

No

Yes

If yes, please give name of attorney. _____

Describe your complaint in detail. Specify any dates, staff you dealt with, monies owed, balances due, etc. Use additional paper/space as necessary. Attach any documentation which will help describe the problem and substantiate your allegations, such as an enrollment contract, correspondence with or from the institution, etc. Do not submit original documents as they may not be returned. What outcome are you seeking from ACCS?

Certification

I certify that the above information is true and correct to the best of my knowledge and grant the ACCS permission to release my name and complaint details to the System Office investigating officer and the institution for response.

Signature of Complainant

Date

Also complete the following FERPA Consent Form and mail both forms to: Alabama Community College System, Attention: Division of Student Success, P.O. Box 302130, Montgomery, AL 36130-2130 or e-mail to complaints@accs.edu.

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FERPA (Federal Educational Rights and Privacy Act)
CONSENT TO RELEASE STUDENT INFORMATION

I, _____, am a student at, or a former student of, _____ (institution). I have submitted a complaint concerning the above institution to the Alabama Community College System.

I hereby consent to the institution's release of any of my educational records, including personally identifiable information that the institution determines is relevant and necessary to provide to the ACCS System Office in response to my complaint. I also authorize representatives of the institution to discuss the details of my complaint with representatives of the ACCS System Office.

Signature _____ Date _____
A# _____