

Academic/College Complaint Form

(This is NOT to be used as an appeal form for grades or plagiarism)

Please complete giving as much detail as possible. Provide copies of supporting documentation (e-mails, etc.)
Submit to your Dean's Office

Name _____ CWID # _____

Date _____ Do you wish to be contacted? ___Yes ___No

Contact info (e-mail and/or phone) _____

Nature of Complaint

Student's attempt to resolve the issue (give date, time, other person involved if applicable, etc.)

FOR OFFICE USE ONLY

Date/Time received _____ Action taken by _____

Notes