



Academic Affairs Grievance/Concern Form

In an effort to help solve your concern or grievance quickly, please provide the following information:

Student Information
Name:
Student ID#:
Program of Study:
STC Email Address:
Phone:
Date:

Details of Complaint (Please attach additional pages or documentation, if necessary).

Details of Outcome You Are Seeking.

Have You Previously Raised This Concern With a Faculty/Staff Member?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, when and with whom did you meet?
What was the result?
If No , in an effort to achieve resolution, please discuss matter with the involved faculty/staff member. <i>If a student receives a final course grade that he/she believes is incorrect, the matter should first be discussed with the instructor. Direct communication between the student and the instructor may clear up any misunderstanding. For additional information, see the "Academic Regulations" section in the STC Catalog and Handbook.</i>

Student Signature:	Date:
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Office Use
Action Taken:
Referred:
Faculty/Dean Signature: