

Student Complaint Form

Name: _____ **Student ID #:** _____

Term: Fall [] Spring [] _____ Summer A [] B [] C [] _____
(Year) (Year)

Classification: [] Freshman [] Sophomore [] Junior [] Senior [] Graduate

FAMU Email: _____ **Day Phone#:** _____

- 1) Area of concern (Department/Office/Course):
- 2) Course Prefix and Number _____
- 3) Instructor's Name: _____
- 4) Please provide a brief description of your complaint (you may attach supporting documents).

- 5) Did you attempt to resolve this issue with the personnel/department?

- 6) What specific resolution are your seeking?

By signing this form, I acknowledge that I have presented the facts of this incident to best of my ability. Deliberate misrepresentation of an incident may lead to a charge for violating FAMU Student Code of Conduct.

Signature

Date