

Rose of York Academic Complaints Form

Student to complete this section:

Name:
Class / Course:
Teacher:

What is your complaint?

What course of action would solve the problem, in your opinion?

Director of Studies to complete this section:

Complaint Received by (Print name):	
Signature:	Date:

What course of action was taken?

Was this complaint resolved to the satisfaction of the student? Yes / No

If not, why not?
