**SCC Complaint Information Form**

Please complete the following form, sign and submit two copies to: Southwestern Community College, 447 Drive, Sylva, NC 28779 in c/o the Dean of the area in which the complaint is against. Your concerns will be addressed as defined by Policy 6.02.03 (grade appeal); Policy 6.03.02.01 (academic related); and Policy 6.03.02.02 (non-academic related.)

**Date of the incident upon which this complaint is based** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is this Complaint About a Person? YES NO

Enter the Name of the Student, Faculty or Staff employee which this Complaint is about:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Category of complaint (check all that apply) | | | | | | | | | |
|  | Academic |  | Facilities |  | Individual |  | Service |  | Other |

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| Statement of Complaint (as clear as possible): |

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| Description of complaint: (be specific regarding who, what, when, where, and provide supporting evidence of complaint) |
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| Have you talked with staff or instructor(s) regarding your concern? (If yes, please describe the outcome.) |
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| **Contact Information**  Name of Person Making this Complaint \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email (SCC) address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of this Complaint \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

SCC does not tolerate retaliation against individuals who file a complaint to SCC administration or against those who cooperate in good faith with the investigation of such reports. To the extent possible, the confidentiality of the reports will be maintained.

***For Official Use Only***

Action(s) Taken

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Resolution

Follow-up needed?

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