

# LAKE LAND COLLEGE

## STUDENT COMPLAINT

This form is to be used in accordance with Board Policy 07.29 Student Complaints and the related Procedures for Resolving Student Complaints. Additional information is available in the online Student Handbook and Right to Know or in printed copy at Counseling Services. Students are encouraged to meet with an academic counselor for additional information regarding the complaint procedure.

Student Name:  Student ID#:   
Address:  Phone Number:  Student

### DESCRIPTION OF COMPLAINT

The description must be completed by the student and should include the following:

1. A summary of the complaint.
2. The facts on which the complaint is based.
3. The resolution requested.

CONTINUED ON NEXT PAGE

**PLEASE FOLLOW THE REQUIRED DOCUMENTATION PROCESS.**

**STEP ONE: RECOMMENDATION FROM FACULTY OR STAFF MEMBER INVOLVED:**

Date:  Signature:

**STEP TWO: RECOMMENDATION FROM IMMEDIATE SUPERVISOR/REVIEW BOARD:**

Date:  Signature:

**STEP THREE: RECOMMENDATION FROM VICE PRESIDENT:**

Date:  Signature:

**FINAL ACTION:**

Date:  Signature:

**ATTACH ADDITIONAL DOCUMENTATION TO SUPPORT THE COMPLAINT.**

Send completed form to [studentcomplaints@lakelandcollege.edu](mailto:studentcomplaints@lakelandcollege.edu)