

STUDENT ISSUE REPORT

Student name:

Date:

Contact information: email

Phone:

Faculty member:

Class:

(include section number)

Issue to be addressed:

What do you want the Dean or Instructor to do to resolve your complaint?*

Procedure to be followed:

Faculty member consulted

Date:

Result of meeting:

Student Signature

date

*NOTE TO STUDENT: Acceptance of this complaint form does not indicate that anything can or will be done to resolve your complaint. All complaints will be resolved in accordance with WCC policies, rules, procedures, and practices. The decision of the Dean is final.

TO BE COMPLETED BY APPROPRIATE DEAN

- Appropriate dean consulted
Result of meeting:

Date:

Student informed:
(signature of appropriate dean)

Date: