

Instructional Complaint Form

STUDENT NAME: _____ P#: _____

STUDENT ADDRESS: _____

PHONE #: _____ CELL #: _____ EMAIL: _____

INSTRUCTOR: _____ SEMESTER: _____ DATE: _____

COURSE NAME/SECTION: _____ FORMAT (CIRCLE ONE): TRADITIONAL | PEN | ONLINE

NATURE OF COMPLAINT: _____

SUPPORTING INFORMATION (USE OTHER SHEETS AS NEEDED): _____

ACTION REQUESTED: _____

DECISION AND REASONS

SUPERVISOR SIGNATURE: _____ DATE: _____

REVIEWED BY DIVISION DEAN: _____ DATE: _____

Any student wishing to initiate a complaint about instruction, instructor or course grades should complete this form and bring it to the instructor's supervisor. Contact information is available on the **Academic Programs by Division** directory found on pages 56-57 of the Student Calendar and Handbook or by visiting www.ptc.edu/directory.

Upon final disposition, copies of the completed form will be distributed to the student initiating the complaint, the instructor, the instructor's supervisor and the curriculum dean. An official copy will be on permanent file in the office of the Vice President for Academic Affairs.

- Student Copy
- Instructor Copy
- Supervisor Copy
- Dean Copy
- Permanent File in Office of Vice President for Academic Affairs