



STUDENT COMPLAINT FORM

Directions: Please complete the requested information below and attach any necessary documentation. Provide as much detail as possible to outline the complaint. Once completed, please submit this form to the WSCC Dean of Students Office on the third floor of the Bailey Building.

Student's Name: _____ Student Number: _____

Date of Complaint Form being completed: _____

Contact Information (email, phone, address, etc.): _____

Nature of Complaint: _____

Date of Incident: _____

Location of Incident (if applicable): _____

Complaint Against: _____

Any Additional Pertinent Information: _____

Student's Signature and Date:

By signing this form, I am authorizing the WSCC Dean of Students to explore information that I have presented and described. I agree that my name may be used and my situation described throughout the investigation of my complaint.