STUDENT COMPLAINT REPORT

In accordance with Reynolds Policy No. 1-4, Student Complaints, J. Sargeant Reynolds Community College (Reynolds) affords students an opportunity to lodge a complaint with the college regarding services or conditions at the college. Please complete the form in its entirety. Upon submission, the appropriate manager will respond in accordance with policy guidelines.

Student Name: _____ Empl ID: _____

Student Email Address: _____ Phone Number: _____

Date of Incident: _____ Location/Office: _____

Description of the Complaint

(Completely describe incident or condition observed. Please include the name of any witnesses. If necessary, please attach another piece of paper to complete description)

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Witnesses

1. **Names**_____ **Contact**_____
2. **Names**_____ **Contact**_____
3. **Names**_____ **Contact**_____

Complainant _____ **Signature**_____

Date _____