THE UNIVERSITY OF ALABAMA®

Student Complaint Form

Internal Complaint Process for Students Regarding Educational Programs (For Complaints Regarding Consumer Protection, Licensure, Quality of Education or Accreditation, etc.)

Please complete the following Student Complaint Form and FERPA Consent Form and mail them with all supporting documentation to The University of Alabama, Attention: Jim Dalton, Provost, Office of Academic Affairs, Box 870114, Tuscaloosa, AL 35487-0114. You may also scan all of your documents (student complaint form, FERPA consent form, and supporting documentation) and email them to provost@ua.edu.

Date:	Academic Year/Term:		
Complainant Information:			
Name:	CWID:		
Local Address: Street number and name/P.O. Box	:		
City:	State:	Zip Code:	
Permanent Address: Street number and name/P.O. Box	:		
City:	State:	Zip Code:	
Phone:	Alternate Phone:		
Crimson Email:	Alternate Email:		
Major/Program of Study:			
Initial Enrollment Date:		_	
Are You Currently Enrolled?			
Yes:			
No:			
If Not Enrolled, Are You a Prospe	ctive Student?		
Yes:			
No:			

Describe your complaint in the space below. Specify any dates, University staff you interacted with, the name of the office/division and location, monies owed if any, balances due if any, etc.					
Attach additional page(s) as nec	· · · · · · · · · · · · · · · · · · ·				
Prior to submission of this form	a, did you seek initial assistance with another University office?				
	Date(s):				
	Date(s):				
	Date(s):				
Email:	Date(s):				
Have you contacted another age	ency, organization or legal representation about this matter?				
Yes:					
No:					
If yes, please give name of agency	y, organization or legal representative:				
What outcome/remedy do you s	eek regarding this matter?				
	on is true and correct to the best of my knowledge and grant The n to release my name and complaint details to appropriate e.				
Printed Name:	Date:				
Sionature:	Date:				

FERPA (Federal Educational Rights and Privacy Act) CONSENT TO RELEASE STUDENT INFORMATION

I, (name:)			, am a
I, (name:)(select or mark appropriate status)	current:	former:	prospective:
student at The University of Alabar	na. I have sub	mitted to The Uni	versity of Alabama a
written complaint regarding a viola		-	*
regarding licensure of a University			
or other state or accreditation requ	irements on (d	late:)	•
I hereby consent to the University's personally identifiable information necessary in response to my compla Alabama to discuss the details of m entities, to include specific accreditation	that The Univ iint. I also aut y complaint w	versity of Alabama horize representat ith other appropr	determines is relevant and lives of The University of liate internal and/or externa
Printed Name:		Date:	
Signature:		Date:	