



**Informal Student Complaint Form
College of Arts & Sciences**

Name _____ ID# _____
(Please print all information) Last First MI
Mailing Address _____
Street City State Zip
EOU email address _____
Phone _____ Major/Minor _____

Informal Complaint:

Please give a paragraph description of your complaint.

REPORT OF CHAIR

Actions and Recommendation of Division (include dates, and append documentation):

Chair Name (printed) _____ Signature _____ Date _____

Date Received in Dean's Office _____

Further Action Needed by Dean? Yes No **If Yes, Dean's Report will be appended.**