



# TRANSNATIONAL ASSOCIATION OF CHRISTIAN COLLEGES AND SCHOOLS

## COMPLAINT PROCESSING FORM

### I. COMPLAINANT INFORMATION

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

STREET ADDRESS: City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: (If outside of USA): \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of College or University Named in the Complaint: \_\_\_\_\_

Status with Institution:  STUDENT  PARENT  FACULTY  OTHER

Current Student Status (If Applicable):  ENROLLED  GRADUATED  PROBATION  WITHDRAWN  
 TERMINATED

### II. COMPLAINT INFORMATION

- A. State the nature of the complaint as succinctly and clearly as possible. This statement helps staff to determine if the complaint falls within the scope of the TRACS policy on complaints.

Type your information in the space provided. This area will expand as you type

- B. Briefly describe the details of the complaint in the clearest possible language including any TRACS Standard with which you feel the institution not compliant.

Type your information in the space provided. This area will expand as you type

- C. List the steps you have taken to resolve your complaint, including any institutional complaint or appeals process. Describe the action(s) taken to date and include hard copies of all related correspondence or communications.

Type your information in the space provided. This area will expand as you type

- D. List the documentation that you have included with this complaint. Materials and documentation used to support your allegations should be limited to and directly related to the reported case.

Type your information in the space provided. This area will expand as you type

\_\_\_\_\_ I certify that I am making no comment or accusation for which I am not able to provide full and proper documentation.

\_\_\_\_\_ I certify that I have completed all institutional complaint and due-process procedures.

\_\_\_\_\_ I attest that the matter contained in my complaint is not in litigation and is not involved in an administrative proceeding before a State or Federal government agency.

\_\_\_\_\_ I certify that the matter contained in my complaint does not involve criminal conduct.

\_\_\_\_\_ I certify that I have read the TRACS ***Policies and Procedures for Complaints against Member Institutions of TRACS***, and agree this form constitutes my formal complaint.

\_\_\_\_\_ I understand that the TRACS complaint policy is not designed to involve TRACS either as an arbiter in disputes between individuals and member institutions, or as a reviewing authority in individual matters concerning an institution's normal role in the daily functioning of the institution including disciplinary matters or contractual rights.

\_\_\_\_\_ I authorize TRACS to submit my complaint and/or any documents concerning my complaint to the involved institution.

\_\_\_\_\_ I hereby certify that all of the information I have given above is true and complete to the best of my knowledge.

\_\_\_\_\_ I understand that this complaint will not be processed unless all the items above are checked and I have signed and dated the complaint.

**YOUR SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**YOU MUST COMPLETE ALL ITEMS ON THIS FORM**