



STUDENT COMPLAINT FORM

Instructions:

- Type or print legibly.
- Be specific and concise in stating your complaint.
If necessary, attach additional documentation in support of your complaint

First Name: _____ Last Name: _____ Student ID: _____

Telephone: (D) _____ (E) _____ Anticipated Date of Graduation: _____

E-Mail Address _____ @umassd.edu Day _____ Evening _____

Nature of Complaint: _____

Student Signature _____ Date: _____

Director of Student Engagement and Professional Development

Comments: _____

Signature: _____ Date: _____

