Northeast Lakeview College Student Academic Grievance Form

Name	Degree	
Banner ID	Day Phone	
Address	Alt. Phone	
City/St./Zip	Email	
Step One: Description of Grievance	Name of Instructor	
Date of Incident	Course/Section	
Write grievance summary or attach prepared document:		
Student/Instructor Conference Date	Resolved	
Student Signature	Unresolved	
Instructor Signature		
If the matter is resolved, then the process ends here	Otherwise, proceed to STEP TWO within 5 business days.	
If the matter is resolved, then the process ends here Forward supporting d	Otherwise, proceed to STEP TWO within 5 business days. ocumentation as necessary.	
If the matter is resolved, then the process ends here Forward supporting d Step Two: Division Chair Conferences		
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If the matter is resolved, then the process ends here Forward supporting d Step Two: Division Chair Conferences Student/Division Chair Conference Date Instructor/Division Chair Conference Date Student Signature Division Chair Signature If the matter is resolved, then the process ends here. Forward supporting d	Resolved Resolved Unresolved Otherwise, proceed to STEP THREE within 5 business days. Resolved	
If the matter is resolved, then the process ends here Forward supporting d Step Two: Division Chair Conferences Student/Division Chair Conference Date Instructor/Division Chair Conference Date Student Signature Division Chair Signature If the matter is resolved, then the process ends here. Forward supporting d Step Three: Inclusive Conference Student/Instructor/Division Chair Conference Date Student/Instructor/Division Chair Conference Date	Resolved Resolved Unresolved Otherwise, proceed to STEP THREE within 5 business days.	
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If the matter is resolved, then the process ends here. Otherwise, proceed to STEP FOUR within 5 business days. Forward supporting documentation as necessary.

Step Four: Division Chair Action

Upon consideration of the cirumstances presented, I hereby affirm*		the grievance in question. st be forwarded to Instructor.
Division Chair Signature	Date	
I accept/ reject the decision of the Division Chair.	Student Signature and Date	
l accept/ reject the decision of the Division Chair.	Instructor Signature and Date	
If the matter is resolved, then the process ends here. Oth Forward supporting docum		IVE within 5 business days.
Step Five: Appeal to Dean		
ACTION BY Final Arbit		
Student/ Instructor/ Division Chair/ Dean Conference Da	ate	
Upon consideration of the cirumstances presented, I hereby affirm* _	/ deny	the grievance in question.
Dean Signature and Date		

Dean's Remarks:

*A conference with the instructor and Chair must be held and written explanation of the decision must be provided. Refer to Student Academic Grievance Policy: FLD Local

The Alamo Community College District, and its affiliated colleges, does not discriminate on the basis of race, religion, color, national origin, sex, age, or disability with respect to access, employment programs, or services. Inquiries or complaints concerning these matters should be brought to the attention of:

Director of Human Resources Title IX Coordinator Human Resources Department 201 W. Sheridan, Bldg. AA San Antonio, Texas 78204.