

5141 Snapfinger Woods Dr.
Decatur, Georgia 30035
770.593.2257 info@gupton-jones.edu

## STUDENT GRIEVANCE FORM

Date		Date of In	Date of Incident		
Gupton-Jones College of Funeral Service she has a grievance to resolve the matter this form to start the grievance process. (preferred method) or complete and physical states of the complete and physical states	r informally; however, if you c To submit, please complete th	annot or have alrais form and e-ma	eady trie	d unsuccessfully, please submit	
Student Name		Student ID			
Address					
Date		Sta	ıte	Zip Code	
Home Phone #	Cell Phone #		Work Phone #		
College E-Mail Address		Personal E-Mail Address			
If your grievance is regarding a cl	ass, please provide the fo	ollowing:			
Class Title		Instructor Name			
Are you currently enrolled in the course? Y		N			
If no, when did you take it? (i.e.,	Spring 2022)				
If your grievance is regarding son	nething other than a class	s, please provio	le:		
Department		Staff Mem	Staff Member Name(s)		
Are you willing to resolve this iss	ue through mediation?	Y	N		
OR I would like more informatio	on about mediation	Y			



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## Select the item that best describes the issue.

Select the nem that dest describes the iss	oue.
Customer Service (phones, service, other)	Discrimination/Sexual Harassment
Employee-student communication	Student to Student Harassment/Sexual Violence
Grading (late/not returned)/Honesty	Equipment (computers, etc.) or Facilities (building, etc.)
Instructor and/or Quality of instruction	Student Conduct
Accommodations	Other (specify)
Issue	
Please describe the issue in more detail: (inclinecessary.	ude any supporting document. Attach additional pages if
Action taken so far to resolve the complaint,	/issue:
What would you like to see because of this p	rocess?

Pierce Mortuary Colleges 2913 Gardner Road Broadview, Illinois 60155 888.547.9600 Pierce.edu



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List any witnesses with contact information if possible:

Communication Notice: Information about your complain mail only. This information will be communicated using the initialing here, you indicate that you understand this communicated using the initial inguity.	e-mail address provided by student. By iication notice and will not hold the Pierce
Colleges, Gupton-Jones College of Funeral Service, its Preside school liable should you fail to follow through with additional mail. You also acknowledge that you do not hold the referency you in any other way during this process. ( <i>Initial Here</i> )	l requests because you do not check your e- ced parties responsible for communicating with
Student Signature	Date

**PLEASE NOTE**: It is violation of college policy to retaliate against a student for filing a grievance.

Gupton-Jones College of Funeral Service will not discriminate against any person because of race, color, creed, religion, national origin, sex, disability, age, marital status, sexual orientation, or status regarding public assistance or membership in a local commission. Gupton-Jones College of Funeral Service prohibits sexual harassment and sexual violence.

## TO BE COMPLETED BY A COLLEGE ADMINSTRATOR

Date of initial investigation/informal meeting

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President Signature	Date	
Resolution/Comments:		
Findings:		