| STUDENT COMPLAINT/GRIEVANCE APPLICATION MCU/EDCOM FORM 11296 (Rev. 1-20) MCU/EDCOMO 1500 | | | |
|---|--|---------------------------------|--|
| Authority: Marine Corps University/Education Command Order (MCU/EDCOMO 1500) Principal Purpose: Formal submission of complaints/grievances for student personnel. | | | |
| Routine Uses: To provide a record to facilitate personnel management actions and decisions; to serve as a date source for complaint/problem information and resolution efforts. Disclosure: Disclosure is voluntary. Failure to complete the requested items could result in delayed command action and/or an inaccurate/incomplete | | | |
| analysis of the complaint/problem. | | | |
| STUDENT COMPLAINT PROCEDURES Specific references, guidance and procedures for filing a student complaint are described in detail in Enclosure (32) of MCU/EDCOMO 1500. All | | | |
| students wishing to file a complaint should review its provisions. Additionally, all students may raise complaints under MCU policy utilizing this form, which outlines a three-step process for registering a formal complaint. These three steps ensure that the appropriate personnel will address the individual student complaints in a timely manner, and at the lowest possible level. Nothing in this policy precludes or limits the right to request mast at any time. | | | |
| NOTE: Students should attempt to resolve their complaint informally by meeting with the faculty advisor, instructor, or course director to attempt to resolve the issue at the lowest possible | | | |
| 1a. NAME: | 1b. GRADE/RANK/TITLE: | 1c. Date: | |
| 1d. SCHOOL/COLLEGE: | | | |
| 1e. SCHOOL YEAR | 1f. CONFERENCE GROUP: | 1 | |
| 1i. I certify that I met with | on | to attempt to resolve my issue. | |
| FACULTY ADVISOR'S SIGNATURE/DATE STUDENT SIGNATURE/DATE | | | |
| STEP I: If the issue cannot be resolved informally, the student has the option to submit a written complaint to the deputy director of the school or college (or the Chief of Staff). This form shall be used for the submission of a written complaint. At this time, the director will inform the MCU chief | | | |
| of staff that a formal complaint has been registered (If the cl 1a. NATURE OF COMPLAINT/PROBLEM: (Give in as muc | | | |
| and date(s) of the occurrence(s); the names of the individuals | involved, witnesses and to whom it may have been | | |
| information relevant to your complaint/problem. Attach additio | nal sheets and/or supporting documents as needed). | | |
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| 1b. REQUESTED REMEDY/OUTCOME: (Clearly state what assistance or complaint resolution you are seeking) | | | |
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| 1c. AFFIDAVIT | | | |
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| I,, have read this statement which begins in Block 1a on this page (page 1) and ends on page I fully understand the statement made by me and certify that the statement is true. I have initialed all corrections. I make this formal statement | | | |
| without threat of punishment and without coercion, unlawful influence, or unlawful inducement. | | | |

STUDENT SIGNATURE /DATE

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| 1d. DEPUTY DIRECTOR: (Provide a detailed explanation of actions taken or attempted to resolve the complaint/problem.) | | |
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| _ | NAME, SIGNATURE/DATE | |
| STEP II. If the student is dissatisfied with the resolution of Step One, he or she may subn | | |
| within five working days of the conclusion of Step One. The director must meet wi written complaint. If the issue involves the awarding of a grade, the decision of the | | |
| 2a. Student: (initial the appropriate choice, sign and date) | | |
| I am satisfied with the resolution of the Deputy Director / dissatisfied with the | resolution and submit my complaint to the Director | |
| | resolution and submit my complaint to the Director. | |
| - | | |
| 2b. DIRECTOR: (Provide a detailed explanation of actions taken or attempted to resolve the | (STUDENT SIGNATURE /DATE) | |
| 20. DIRECTOR. (Provide a detailed explanation of actions taken of attempted to resolve the | e complain/problem.) | |
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| STEP III. If the student is dissatisifed with the resolution proposed by the Director, the formal | NAME, SIGNATURE/DATE | |
| University. This action may be taken if the student disagrees with the decision of the | he director or alleges serious abuse of discretionary | |
| authority. If at all possible, the chief of staff will address the complaint within ten w 3a. Student: (initial the appropriate choice, sign and date) | orking days. | |
| | | |
| I am satisfied with the resolution of the Director / disagree with the decision a | nd/or wish to submit my complaint to the Chief of Staff. | |
| I allege serious abuse of discretionary authority. | | |
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| | (STUDENT SIGNATURE /DATE) | |
| 3b. CHIEF OF STAFF, MCU ACTION: | | |
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| | SIGNATURE/DATE | |
| 3c. Student acknowledgment | | |
| I have been informed and acknowledge the Chief of Staff's action on my complaint. I understand that this acknowledgment does not necessarily | | |
| constitute agreement with the action taken. | | |
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| WITNESS' SIGNATURE/DATE | STUDENT SIGNATURE/DATE | |