

## NON-ACADEMIC STUDENT COMPLAINT FORM

**Instructions**

1. Please PRINT or TYPE
2. Upon Completion, Send this form to:  
**Complaint Resolution Committee c/o  
 Institutional Compliance Officer  
 The University of Texas Health Science  
 Center at Tyler, TX 75708**

|                                      |             |                  |                  |
|--------------------------------------|-------------|------------------|------------------|
| <u>FIRST NAME</u>                    | <u>M.I.</u> | <u>LAST NAME</u> |                  |
| Address ( <i>number and street</i> ) |             |                  |                  |
| City, State, ZIP code                |             |                  |                  |
|                                      |             |                  | Telephone number |
| Email address                        |             |                  |                  |

Current Student Status:

- ENROLLED  
 GRADUATED  
 PROBATION  
 WITHDRAWN  
 TERMINATED

Describe below the nature of the complaint (Use reverse side if additional space is needed). Briefly describe the details of the complaint; state relevant facts, and document and support the allegations. Also, please specify the resolution you seek through this complaint process.

**STUDENT SIGNATURE:**

**DATE:** \_\_\_\_\_