The University of North Carolina
GENERAL ADMINISTRATION
910 RALEIGH RD, CHAPEL HILL, NC  27515-2688
Telephone: (919) 962-4558 • Fax: (919) 962-7139 • E-mail: studentcomplaint@northcarolina.edu

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Student Complaint Form

To file a complaint concerning a postsecondary institution offering degree programs in North Carolina, please fill out and email this form to studentcomplaint@northcarolina.edu or mail it to the University of North Carolina General Administration at the address listed above to the attention of Terrence Scarborough, Director for Licensure. Complaints concerning any of the 58 North Carolina Community Colleges can also be submitted directly to the Office of the Senior Vice President, Programs and Student Services/Chief Academic Officer for the North Carolina Community College System, Dr. Lisa M. Chapman, by any of the following methods: MAIL: 5016 Mail Service Center, Raleigh, NC 27699-5016; FAX (919)-807-7173; PHONE: (919) 807-7096; E-MAIL: chapmanl@nccommunitycolleges.edu

Person Filing Complaint

Last Name: ___________________________ First: ___________________________

Address: ___________________________

City: ___________________________ State: _______ Zip: ___________________________

Phone Number: _______________ Email: ___________________________

☐ CHECK THIS BOX IF YOU WANT TO REMAIN ANONYMOUS.

Information About the Institution Your Complaint is Against

Name of School: ____________________________________________

Address: ____________________________________________

City: ___________________________ State: _______ Zip: ___________________________

Website: ___________________________ Telephone: ___________________________

Enrollment Information

Student Name While Enrolled: ____________________________________________

Name of Degree Program: ____________________________________________

Enrollment Dates: ____________________________________________

Student Status: ☐ Currently Enrolled ☐ Withdrawn ☐ Terminated ☐ Graduated

☐ None of the Above
Graduation or Expected Graduation Date: ________________________________

Details of Complaint

Please provide details of your complaint. Include dates, persons, and any pertinent information necessary to resolve your complaint. Use additional pages if necessary.

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Have you attempted to resolve this matter with the institution? Yes ☐ No ☐

If yes, with whom did you speak to?

Name: _____________________________________________

Contact Number: _____________ Date of Communication: _________________

What were the results of this communication? Use additional pages if necessary.

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What is your desired outcome? Use additional pages if necessary.

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