Palo Alto College

Student Academic Grievance

Note: A student wishing to file a “Student Academic Grievance” should use this form and follow the ACCD “Student Academic Grievance Procedure,” FLD Local. These procedures, including the timelines, should be strictly followed.

Student Name ___________________________ SSN _______________________

Date ___________________ Phone _______________ Major _______________________

Course Name and Number ___________________________ Section ______

Instructor’s Name ___________________________

Date(s) of incident being grieved ___________________________

Brief description of grievance ____________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

(Use another sheet if more space is needed.)

Student’s Signature ___________________________

Date of Chairperson’s conference with instructor ___________________________

Instructor’s response to grievance __________________________________________

_____________________________________________________________________

Grievance: _________ Resolved _________ Unresolved

Instructor’s Signature ___________________________ (over)
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Date of conference with Department Chairperson, Faculty and Student ____________

Grievance: __________ Resolved __________ Unresolved

Result of meeting of Chairperson with faculty and student.

ACTION BY CHAIRPERSON:

Grievance is: __________ Resolved __________ Unresolved

Department Chairperson Signature ________________________________

STUDENT: I accept/reject (circle) the decision of the Chairperson.

Signed ________________________________ Date ________________

INSTRUCTOR: I accept/reject (circle) the decision of the Chairperson.

Signed ________________________________ Date ________________

If either the student or the instructor is not satisfied with the Chairperson’s decision, he or she may appeal to the Dean within five (5) days of the Chairperson’s decision. A complete record of the grievance will be forwarded to the Dean by the Chairperson. The Dean and the Chairperson will meet with the student and the instructor. After hearing both sides and reviewing the record, the Dean will render a decision, in writing, affirming or denying the grievance within five (5) days. The decision of the Dean is final.

ACTION BY DEAN:

Signed ________________________________ Date ________________