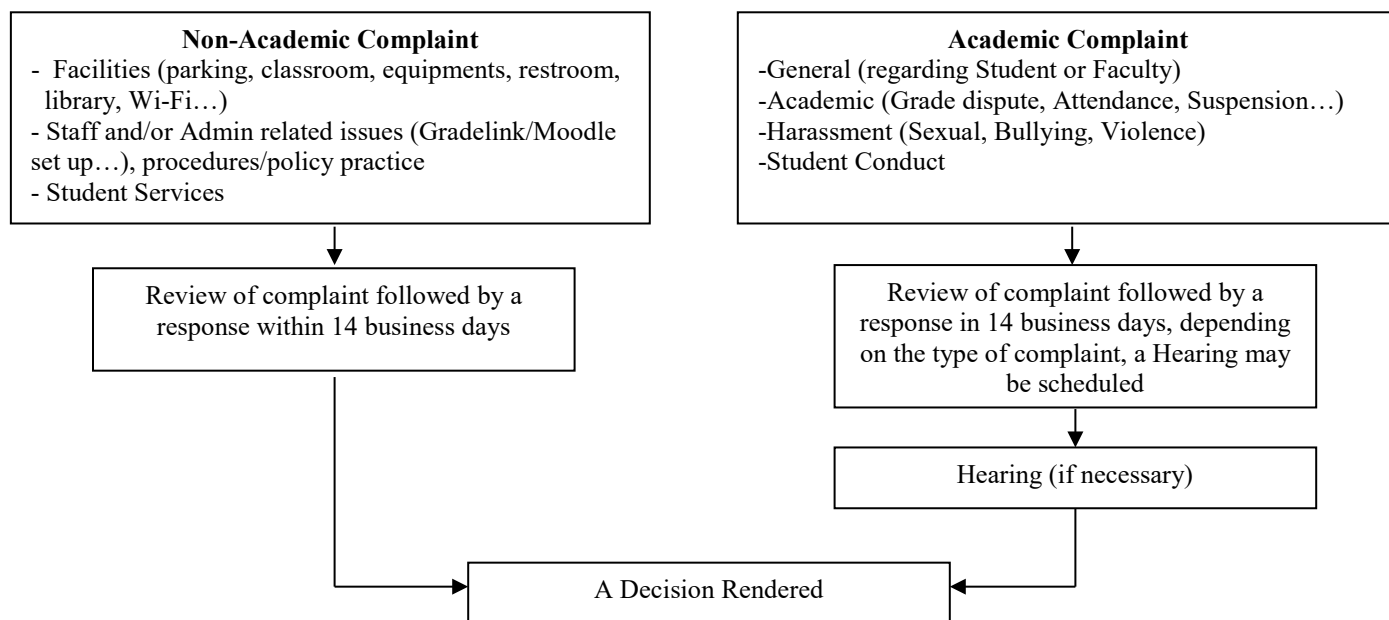




COMPLAINT PROCESS

Students should attempt to resolve any grievances they may have with the school first. However, should attempts to resolve grievances with the appropriate school officials fail, students may contact: The Bureau of Private Postsecondary Education by calling Toll Free (888) 370-7589 or log on to their website at <http://www.bppe.ca.gov>.

The Complaint Process:



You are encouraged to follow the complaint process outlined in the **Student Catalog** and **Student Handbook** before filing a complaint with the school.

It is extremely important to provide evidence to support your complaint. Be sure to save a copy of your complaint and all documents submitted. Do not send originals as they cannot be returned. CTU considers all complaints important and will process your complaint and provide a response in a timely manner.

Thank you for your patience during the complaint process. To obtain updates regarding the status of your complaint or for other questions, please contact the Office of Student Services at (213)-484-4440 or email admin@catu.edu.



CALIFORNIA TRINITY UNIVERSITY

2333 Beverly Blvd. Los Angeles, CA 90057

Web: <http://www.catu.edu>

Email: admin@catu.edu

Tel: (213) 484-4440 Fax: (213) 402-6838

STUDENT COMPLAINT FORM

Name: _____ Date: ____/____/____ Case Number: _____
Last First

| | |
|-------------------------|--|
| Phone number: | E-mail address: |
| Program of Study | <input type="checkbox"/> Master of Business Administration (MBA) |
| Applicable Quarter/Year | <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall / Year _____ |

| | |
|---|---|
| What is the complaint about? (please check all that applies): | |
| <input type="checkbox"/> Academic | <input type="checkbox"/> General (Student or Faculty) <input type="checkbox"/> Academic (Grade dispute, Attendance, Suspension, Probation, Integrity dispute) <input type="checkbox"/> Harassment (Sexual, Bullying, Sexual Violence) <input type="checkbox"/> Student Conduct |
| <input type="checkbox"/> Non-academic | <input type="checkbox"/> Financial (Tuition-related, Payment plan, Scholarship, Refund...) <input type="checkbox"/> Staff/Admin-related issues (Gradelink, Moodle, Set-up, Email, Communication,..), procedure/policy practice <input type="checkbox"/> Student Services (Student Club, Guest Speaker, Workshop, e-Newsletter, Orientation, Graduation,..) <input type="checkbox"/> Facilities (library, classroom, learning equipment, restrooms, student lounge, library, parking, lost items, Wi-Fi...) |
| <input type="checkbox"/> Others | Specify the issue that you would like to complain about: |

Please write down your complaint: (provide details and any and all evidence like date, time and parties involved)

for Student/Faculty/Staff-related complaints, please proceed to answer the questions on the next page →

I understand that the foregoing statements are true and correct to the best of my knowledge.

Student Name

Signature

Date

Office of Student Services

Signature

Date

To be able to better address your academic-related complaints, please answer the following questions:

1. Did you read about Grievance Policy on the Student Handbook? ☐ Yes ☐ No

2. Does this complaint concern a class or your Professor? ☐ Yes ☐ No

a. If yes, did you discuss the problem thoroughly with the Professor? ☐ Yes ☐ No

Subject:

Name of the Professor:

Date: ____/____/____

b. What was the outcome of your discussion?

3. Does this complaint concern a Staff? ☐ Yes ☐ No

a. If yes, did you discuss the problem thoroughly with the Staff? ☐ Yes ☐ No

Name of the Staff:

Date: ____/____/____

b. What was the outcome of your discussion?

4. Does this complaint concern a fellow Student? ☐ Yes ☐ No

a. If yes, did you discuss the problem thoroughly with the Student or Professor? ☐ Yes ☐ No

Subject:

Name of the Student/ Professor:

Date: ____/____/____

b. What was the outcome of your discussion?

5. If you did not do any of the above, please explain why?

Student Name

Signature

Date

Office of Student Services

Signature

Date

OFFICE USE ONLY

Student Status

☐ Applicant (Initial / COS/ Transfer)

☐ Continuing Student

☐ Graduating Student

☐ Withdrawing (Transfer-out / Terminate) ☐ Others _____

Academic Performance

Overall GPA:

Total Units Earned:

Failing Marks:

Advice Given:

Resolution:

Adviser/Decision Maker

Signature

Date