State Reciprocity Agreement Student Complaint Form

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Student must follow the institutional complaint process provided by the college or university before submitting a complaint to the State Portal Agency. Did you submit a complaint to the institution according to their complaint policy? YES NO			
Please submit documentation that you have exhausted your appeals with the institution. You should include documentation that you submitted to the institution regarding your complaint and any letters from the institution documenting its final decision regarding your complaint. Documentation should be emailed to FLSARAinfo@fldoe.org.			
I. COMPLAINANT INFORMATION			
A. First Name:	M.I.	Last Name:	
B. Street Address:			
City:	State:	Zip Code:	
Country: (If outside of USA)			
D. Office/Home Telephone Number:		Cell Telephone Number:	
E. Email Address:			
II. COMPLAINT INFORMATION			
F. Briefly describe the details of the complaint, nature of the incident, dates and names of individuals involved and institutional employees with whom you have discussed your complaint, in the clearest possible language.			

H. How would you like to see your complaint resolved? For example, do you want a refund of tuition or to repeat a class?
I. Current Student Status (If applicable): □ ENROLLED □ GRADUATED □ PROBATION □ WITHDRAWN □ TERMINATED
□ I hereby certify that all of the information I have given above is true and complete to the best of my knowledge.
By submitting this form, I understand that I am granting permission to the as the State Portal Entity and members of the SARA to contact institution officials to discuss my complaint and a possible resolution.
YOUR SIGNATURE: DATE:
PRINT YOUR NAME:
ALL SECTIONS OF THIS FORM MUST BE COMPLETED ALONG WITH ALL DOCUMENTATION INCLUDED

WITH SUBMISSION.