



**SCC STUDENT NON- ACADEMIC GRIEVANCE FORM**

\_\_\_\_\_  
Name Student ID# Date

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Day Phone # Evening Phone #

**PROGRAM OF STUDY:** \_\_\_\_\_

**DATE(S) GRIEVABLE ISSUES OCCURRED:** \_\_\_\_\_

**ACCORDING TO THE SCC COLLEGE CATALOG, A NON-ACADEMIC GRIEVANCE IS DEFINED AS:**

“a formal difference or dispute between a student and a college employee about the interpretation and/or application of the policies and procedures of the campus or college that negatively affects The student. A non-academic grievance may be based on one of the following claims: arbitrary and/or capricious actions by a college employee or administrative office; policy or procedure applied unfairly and/or in a different manner than it was applied to others; administrative error in the application of the policy or procedure. “

**Please describe the alleged violation of stated College policy or procedure:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. Have there been attempts to resolve this grievance through the informal procedure?  Yes  No  
Please provide name(s) of College staff involved in the informal grievance resolution procedure:

\_\_\_\_\_

2. Describe the results of attempting to resolve the grievance informally:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please describe the resolution being requested:**

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**Please complete the following statements:**

Students filing a grievance are permitted to appear in person to discuss their grievance. Please indicate the following:

I request to appear in person to review my complaint.  
 I do not wish to appear before the grievance committee.

A witness and/or an advisor with specific personal knowledge of the situation is permitted to attend. This person will not be permitted to speak independently for the student or in his/her stead. Please indicate the following:

I do not intend to invite a witness/advisor to the hearing.  
 I request that the following witness attend the hearing: \_\_\_\_\_

**STUDENTS WILL BE NOTIFIED ABOUT THE STATUS OF THEIR GRIEVANCE WITHIN FIVE (5) DAYS OF RECEIPT OF THIS FORM UNLESS AN ALTERNATE DATE HAS BEEN MUTUALLY AGREED UPON.**

For additional information on the Grievance Hearing Process, please consult the SCC Student Handbook or current SCC College Catalog under the section Grievance/Hearing/Appeal Procedures for Students.

**\*\*\*Please submit this completed form to the Dean of Students. Be sure to include any additional documentation to be reviewed by the Grievance Hearing Committee\*\*\***

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_ Date \_\_\_\_\_  
Grievance Received by Dean of Student Service