STUDENT GRIEVANCE PROCEDURE FORM

B & M CAREER INSTITUTE

NOTE: Every field must be completed to avoid delays in processing.

INSTRUCTIONS: This Grievance form is for use only by Students currently enroll in one of B & M CAREER INSTITUTE COURSES to initiate the grievance process, complete all items in the GRIEVANCE INFORMATION section and, if need it, add additional documentation to this form, submit this form within the timeframes to the admission office. NOTE: If within 48-hours you haven't receive a conclusion to your complaint, please inform the School Director.

GRIEVANCE INFORMATION

STUDENT FULL NAME:	DATE:
STUDENT CASE OF STUDY:	DATE OF INCIDENT:
STUDENT MAILING ADDRESS:	
CITY:	STATE: ZIP CODE:
PHONE NUMBER:	PHONE NUMBER:
STUDENT EMAIL ADDRESS:	

Statement of Grievance (Please state the event causing this grievance and list the specific statutes, policies, rules, regulations or agreements you claim have been violated, misapplied or misinterpreted. Additional sheets may be attached.):

Proposed Solution to Grievance by Student:

STUDENT: The grievant should retain a copy of this form for student records. The signature below indicates that you are a filing a grievance, and any information on this form is truthful.

Student Signature: _____ Date: _____

RECEIVED BY:

Signature of School Representative: _____ Date: _____

GRIEVANCE SETTLEMENT

Decision of Grievance by School Official:

STUDENT:

☐ I acknowledge settlement of my grievance ☐ I request FINAL REVIEW by School Director

Student Signature: _____ Date: _____

Final Grievance Decision:

STUDENT:

☐ I acknowledge settlement of my grievance

Student Signature: _____ Date: _____

Signature of School Representative: _____ Date: _____