

## COMPLAINT FORM

Mail the complaint and required documentation to:

SC Commission on Higher Education

Academic Affairs

Attn: Student Complaint

1122 Lady Street, Suite 300

Columbia, SC 29201

or

E-mail: [submitcomplaint@che.sc.gov](mailto:submitcomplaint@che.sc.gov)

### Student Information

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

### Institution Information

Name of Institution: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Person(s)/Committee Who Made Final Determination: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

### Details of Complaint

Program of Study: \_\_\_\_\_

Dates of Attendance: Start: \_\_\_\_\_ End: \_\_\_\_\_

Date(s) of Incident: \_\_\_\_\_

1. Have you completed the institution's complaint process and received a final determination?

Yes:

- Provide a copy of the institution's complaint resolution procedure.
- Provide documentation of your exhaustion of the institution's complaint resolution procedure including any final letters of determination issued by the institution.

No:

- Your complaint will not be considered until this requirement is met.

2. Information to include in your complaint.

- The events or circumstances upon which the complaint is based.
- The names and titles (if any) of the individuals involved.
- A statement of the resolution you seek.
- List of other entities such as the institution's accrediting agency or other state or federal agencies where you have also filed a complaint. Include name of entity, contact person, date filed, and status of the complaint.

## Authorization

Initial the following:

- a) \_\_\_ I authorize the South Carolina Commission on Higher Education (CHE) to transmit a copy of my complaint (along with any attachments) to the institution for its response.
- b) \_\_\_ I authorize CHE, as part of its investigation of my complaint, to contact and discuss my complaint with officials, faculty, and staff at the institution.
- c) \_\_\_ I authorize the CHE to transmit this complaint and attachments to another state agency (such as the Office of the Attorney General or South Carolina Department of Education), a federal agency, the institution's accrediting agency, or an educational association to which the institution belongs.
- d) \_\_\_ I authorize the CHE to transmit this complaint (along with any attachments) to the appropriate state university system for investigation and resolution, if my complaint pertains to an institution in the State Technical College System or the University of South Carolina system.
- e) \_\_\_ I understand and agree that the CHE and its staff are not my agents or attorneys, nor do they represent me in a legal capacity.
- f) \_\_\_ I understand that the Commission will not mediate complaints where the complainant has retained legal counsel or initiated legal action.
- g) \_\_\_ I understand and agree that CHE may disclose the information in response to a request under the Freedom of Information Act, Title 30, Chapter 4, SC Code of Laws, 1976, as amended.
- h) \_\_\_ I authorize institution representatives to photocopy and release documents or the complete and entire contents of my student financial, academic, personal, and all other records held by the institution upon request by CHE.
- i) \_\_\_ I authorize the institution to release my records to and discuss my records with CHE to investigate and act upon the complaint.
- j) \_\_\_ I agree to hold CHE and the institution harmless from any and all liability for the release of my records to any entities as specified above or any release of information as requested by accrediting authorities or government agencies.
- k) \_\_\_ I understand that the Commission may not have jurisdiction to mandate resolution of my complaint.

**Declaration and Signature**

I declare under penalty of perjury under the laws of the State of South Carolina that the allegations contained in this complaint are true and accurate to the best of my knowledge and belief.

Signature:

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Typed/Printed Name:

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