

RESPONSE TO STUDENT GRIEVANCE

Use this form to reply to the Student Grievance Report on which you have been named as the respondent. Please take the time to print or write clearly.

Your Name:

Social Security Number:

LoLA ID

(The ssn must be concealed on all copies of this document)

Today's Date:

YOUR RESPONSE TO THE Alleged Grievance

Instructions:

Be specific. Describe clearly the alleged grievance. (If necessary, seek assistance from a person of your choice in preparing this form.)

Please attach to this form any written and signed statements or other evidence which support your description of the alleged grievance.

Note: If you have already completed and turned in a Response to Student Grievance Report and have no additional information to provide you may check here: sign and date the form on the next page.

	Date	
Signature:	Date:	