



# Okaloosa Technical College

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## Student Grievance Form

Name:

Name of Program:

Problem or Concern:

Date the event occurred or approximate date the problem started:

Describe the event or problem:

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Attach copies of documents and any other information necessary to understand the problem.

Please note that all information will be considered confidential and will be kept separate from the student's academic files.

I certify that I have attempted to resolve this problem with the Instructor or Staff member concerned and that the information provided above is true and accurate to the best of my knowledge

Signed: \_\_\_\_\_

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