



Student Complaint Form

Barton College strives to provide the highest quality educational opportunities available. If a conflict does arise, the College desires to resolve complaints and concerns in an expeditious, fair, and amicable manner. Individuals who desire to file a complaint or appeal the outcome of a complaint should follow the College's Student Complaint Procedure, located in the [Student Bulldog Handbook](#), and fill out this Student Complaint/Appeal Form.

Academic complaints should be emailed to the Associate Vice President for Academic Affairs (knpennington@barton.edu). Campus Life complaints should be emailed to the Dean of Students (jmhigh@barton.edu).

Appeals should be emailed to the [Divisional Vice President\(s\)](#) who oversee the department(s) addressed in the complaint.

Complaints and appeals may also be submitted via [Maxient](#), which requires a Barton username and password.

Your Information

Your full name: **(Required)**

Your position/title:

Your phone number:

Your email address: **(Required)**

Your physical address:

My complaint is against: **(Required)**

- ☐ Faculty Member
- ☐ Staff Member
- ☐ Department
- ☐ Other

Urgency of this report: **(Required)**

- ☐ Not Urgent
- ☐ Urgent

Date of incident: **(Required)**

Time of incident:

Type of complaint: **(Required)**

- ☐ Academic
- ☐ Campus Life (Residence Life, Culinary Services, Campus Safety, Health Services)
- ☐ Other Department: Appeal

Involved Parties

Please indicate whom your complaint is against:

Party #1: (Required)

Name or Organization:

Role:

- ☐ Faculty
- ☐ Staff
- ☐ Organization
- ☐ Other

Email address:

Party #2: (if applicable)

Name or Organization:

Role:

- ☐ Faculty
- ☐ Staff
- ☐ Organization
- ☐ Other

Email address:

Party #3: (if applicable)

Name or Organization:

Role:

- ☐ Faculty
- ☐ Staff
- ☐ Organization
- ☐ Other

Email address:

Please Complete the Following Questions

Is this a complaint or an appeal? **(Required)**

- ☐ Complaint
- ☐ Appeal

Please describe your complaint or appeal in detail, including the nature of the incident and date(s) of the incident. If filing an appeal, please describe in detail why the resolution of the complaint was unsatisfactory and why you wish to appeal. **(Required)**

How would you like to see your complaint or appeal resolved? **(Required)**

Please indicate any Barton College employees with whom you have discussed your complaint or appeal, if any:

I certify that the information provided on this form is true and correct to the best of my knowledge and belief. **(Required)**

☐ I agree

Permission to use data **(Required)**

☐ I understand that by submitting this form, I am granting Barton College permission to process my personal data and to contact me with information relevant to the services or opportunities offered, either directly or indirectly, through Barton College.

Supporting Documentation

Attach any relevant photos, video, email, and/or other supporting documents along with this form.