



## **Adult & Community Education, Columbus City Schools Student Complaint, Appeals, and Grievance Process**

Students enrolled in Adult & Community Education, Columbus City Schools programs have the right to file a formal complaint related to classroom situations, grade disputes, or administrative actions. Students must follow the steps in the process described below.

### **STEP 1 – Resolution without Formal Action**

If a student has concerns related to classroom situations, grade disputes, or administrative actions, within 5 business days, the student should meet with the faculty or staff member(s) with whom there has been a conflict. It may be possible to resolve the concerns without the need for formal institutional action. However, if the student's complaint cannot be resolved by contacting the faculty or staff member(s), the student may proceed to **STEP 2**.

### **STEP 2a and 2b – Formal Student Complaint and Proposed Resolution**

If the informal meeting did not resolve the conflict, the student may file a **Student Complaint Form** (p. 2 in this packet) within 5 business days of meeting with the faculty or staff member(s) with whom there has been a conflict. Upon receiving the **Student Complaint Form**, the Program Administrator will review the Complaint and respond in a **Proposed Resolution to Student Complaint Form** (p. 2 and 3 of this packet). If the proposed written resolution is not accepted by the student, the student may proceed to **STEP 3**.

### **STEP 3 – Student Appeal**

If the Program Administrator's proposed resolution is not acceptable to the student, he/she may file a **Student Appeal Form** (p. 4 of this packet) to the Program Administrator, who will schedule a hearing with appropriate ACE faculty and/or staff to review the appeal.

### **Step 4 – Student Hearing for Grievance**

Upon receiving the **Student Appeal Form** from the student, the Program Administrator will schedule and hold a **Student Hearing Form** (p. 5 of this packet) with appropriate faculty and/or staff and subsequently provide a) written notification of the final decision to the student; and b) a copy of this entire packet to the Student Services Coordinator.

#### **Please note:**

Complaints concerning criminal misconduct should be filed with local law enforcement.

Complaints relating to violations of federal law should be filed directly with the federal agency having jurisdiction over the matter.



**Adult & Community Education, Columbus City Schools**  
**Step 2a: Student Complaint Form**  
**(completed by the student)**

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

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Place a checkmark next to the program you are enrolled in at ACE.

Practical Nursing ☐ HVACR ☐ Nurse Aide ☐ Other ☐ (please identify) \_\_\_\_\_

Briefly explain why you are filing this complaint.

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Please summarize the **facts** of your complaint, providing specifics related to dates, times, incidents, conversations, names, etc. Attach any supporting documentation.

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\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Student Complaint Form must be submitted by the student to the Program Administrator within 5 business days of the student meeting with ACE faculty and staff to informally resolve the conflict.*



**Adult & Community Education, Columbus City Schools**  
**Step 2b: Proposed Resolution to Student Complaint Form**  
**(completed by the Program Administrator)**

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

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

Place a checkmark next to the program the student is enrolled in at ACE.

Practical Nursing ☐ HVACR ☐ Nurse Aide ☐ Other ☐ (please identify) \_\_\_\_\_

Briefly describe the complaint filed by the student.

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Please describe your proposed resolution to the student's complaint. Attach any supporting documentation.

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\_\_\_\_\_  
Program Administrator (signature)

\_\_\_\_\_  
Date

*Proposed Resolution Form must be provided by the Program Administrator to the student within 5 business days of receiving the student complaint.*



**Adult & Community Education, Columbus City Schools**  
**Step 3: Student Appeal Form**  
**(completed by the student)**

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

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Place a checkmark next to the program you are enrolled in at ACE.

Practical Nursing ☐ HVACR ☐ Nurse Aide ☐ Other ☐ (please identify) \_\_\_\_\_

Briefly explain why you are filing this appeal, including why you believe the proposed resolution by the Program Administrator is not satisfactory.

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Student Appeal Form must be submitted by the student to the Program Administrator within 5 business days of receiving the proposed resolution.*



**Adult & Community Education, Columbus City Schools**  
**Step 4: Student Hearing Form for Grievance**  
**(completed by the Program Administrator)**

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

Appellant Name: \_\_\_\_\_ Program Administrator Name: \_\_\_\_\_

Place a checkmark next to the program the student is enrolled in at ACE.

Practical Nursing ☐ HVACR ☐ Nurse Aide ☐ Other ☐ (please identify) \_\_\_\_\_

Faculty/Staff in Attendance \_\_\_\_\_

Witnesses at Hearing \_\_\_\_\_

Appeal Request Statement \_\_\_\_\_

Documentation Provided \_\_\_\_\_

Summary of Hearing Discussion \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendation \_\_\_\_\_

Determination \_\_\_\_\_

\_\_\_\_\_  
Program Administrator (signature)

\_\_\_\_\_  
Date

*The Program Administrator must provide written notification of the final decision to the student and a copy of this entire packet to the ACE Student Services Coordinator within 5 business days of the hearing.*