

## New Jersey City University Academic Grievance Form

Student's Name		ID No	
Address			
Day Phone	Evening Phone		E-Mail
Course Title/Number		Days/Times	
Semester/Year Course Taken		Instructor	
and other academic concerns the f member. Step 2: Student may appea academic dean. Grievances not res	following steps must be taken al to the appropriate department olved at the dean's level may be. The Vice President for Aca	en; Step 1: Student disc ent chairperson. Step 3: 5 by be referred by the stud	equirements, attendance requirements cusses the complaint with the faculty Student may appeal to the appropriate lent, in writing, to the Student Affairs or a final decision within six (6) weeks
Nature of concern written by stud	dent (use additional sheets	if necessary):	
-			
Student's Signature			Date
Faculty member's recommendate	ion for resolution (use addi	tional sheets if necessary	ary):
Faculty Signature			Date

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Revised 11/2004

Chairperson's recommendation for resolution (use additional	al sheets if necessary):
Chairperson's Signature	Date
Dean's recommendation for resolution (use additional sheets	s if necessary):
Doon's Signature	Data
Dean's Signature	Date
Student Affairs Committee recommendation for resolution (	use additional sheets if necessary):
Student Affairs Committee Signature	Date
Vice President for Academic Affairs recommendation for re	colution (vac additional abouts if managemy).
Vice President for Academic Affairs recommendation for re	solution (use additional sheets II necessary):
Vice President for Academic Affairs Signature	Data
vice i resident for Academic Affaits Signature	Date

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