PROBLEM RESOLUTION REQUEST FORM

Describe the nature of the problem, and be as specific as possible (use a separate page, if necessary):


Have you taken any steps to resolve this problem?


What would be your desired resolution regarding this matter?


Student Signature: _____________________________________________  ID No. ________________

Submit completed form to the Registrar’s Office.

Office use only:  Received date:
Resolution or routing:
Problem routed to/date:
Follow-up required by: