



Carl Albert State College

Campus Concern/Grievance Form

This form is used to report any campus concern or grievance. A grievance is an educational or personal issue or condition that a student, employee, or visitor believes to be unfair, inequitable, discriminatory, or a hindrance to his/her education, employment, safety, etc.

Please return completed form to the **Human Resources Office**, 1507 S. McKenna, Poteau, OK 74953, Holton Business Building 866(D), fax to 918-647-1359.

Phone 918-647-1373, email whiggins@carlalbert.edu

Name (Print or type):	
Address:	City/State/Zip:
Home Phone:	Cell Phone:
Email Address:	

Are you a: CASC Student _____ CASC Visitor _____ CASC Employee _____

Concern Relates To: (Please check all that apply)

- _____ Campus Concern
- _____ Discrimination Grievance *(applies to unlawful discrimination based on race, color, national origin, sex, age, religion, disability or veteran)*
- _____ Harassment/Retaliation Grievance
- _____ Title IX Grievance
- _____ Student Conduct Grievance

On the following page(s) please describe the incident in detail.

- Please note by signing this form you are giving permission for any of your records to be reviewed.

Signature

Date

Please return completed form to Human Resources.

Date of Incident: _____ Time of Incident: _____

Location of Incident: _____

Person(s) Involved: _____

Name of Witness(es) if any: _____

Describe the Issue (Be Specific): _____

(Use additional pages if needed.)

Preferred Resolution: _____

(Use additional pages if needed.)

Signature: _____ Date: _____

Please return completed form to Human Resources.