



Compliant Form

Name:

First:

Last:

Address:

Phone:

Email/ Postal address:

Name of College/University:

Profession:

Your status in relation to College or University:

Current student status (If applicable):

Complaint Details:

Please give a summary of the complaint (State the nature of the complaint with attached appropriate evidence in five sentences or less):

Signature:

Date:

By entering my name above, I consent to the use of this method of contract, and I have read and agree to the terms and conditions in NCAMC Policies
