



# Request for Formal Hearing

Richland Community College

Date \_\_\_\_\_

Name \_\_\_\_\_ I.D. No. \_\_\_\_\_

Address \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_ / \_\_\_\_\_

### Type of Grievance/Appeal

(Check)

- Academic Dishonesty
- Grade Appeals
- Graduation Requirements
- Other Academic-Related Issue

- Academic Suspension
- Educational Guarantee
- Student Conduct (in class)

### Return This Form To:

Vice President  
of  
Student and Academic  
Services

- Americans with Disabilities Act  
(Accommodations)
- Sexual Harassment  
( by student, staff, faculty)

- Discrimination  
(age, disability, gender, race)
- Student Employment

Director  
of  
Personnel

- Financial Aid Suspension
- Student Conduct  
(out of class)

- Confidentiality of Records

Vice President  
of  
Student and Academic  
Services

- Tuition Refunds

Vice President of  
Finance and Administration

### Action Requested:

Indicate what specific action you wish the College to take (your suggested solution):

Describe details of grievance/complaint on reverse side)

*Describe in as much detail as possible the nature of the problem and what steps you have taken to this point to resolve the problem through the informal process (i.e., people with whom you have spoken, etc. ) Attach any supporting information to document/verify your situation. Refer to the Student Rights & Responsibilities and Grievance & Disciplinary Proceedings Guide for detailed information about the formal resolution process.*

**Use additional sheets as necessary.**

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