NORTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT

FULLERTON COLLEGE

VETERANS RESOURCE CENTER

COMPLAINT RESOLUTION FORM

Name: _____Student ID#: _____
Address:_____
Phone Number: _____Email: _____

What is the nature of your complaint? (include important details)_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

When did this happen? _____

_____

_____

What have you done to try to resolve this issue? _____

_____

_____

_____

_____

How do you envision this issue being resolved? _____

_____

_____

_____

_____

Student Signature: _____ Date: _____

Please submit this form to the VRC front-office staff.

Revised 12/7/2017