



Instructional Feedback Form

Please follow the steps on this form in order . Type or print clearly.
Completed form should be submitted to Heather Lawler, M2820 or heather.lawler@arapahoe.edu.

Student should check the box below indicating that she/he has met with the instructor but was unable to resolve the complaint. Student must submit feedback form in a timely manner. Further attempts will be made to resolve complaints within 10 calendar days. During this attempt at a settlement, students should note that the Director of Student Affairs will be in contact with the instructor and/or the supervisor of the instructor.

1. I have met with my instructor and was unable to resolve my complaint. (Check one) YES NO

If yes, complete the following information:

2. Student Name (please print): _____ SSID: _____

Address: _____
Street City State Zip

Phone: _____ / _____ Email: _____
Home Work

3. Complaint against: _____ Course Number/name: _____

4. State the nature of your complaint and the result of your conversation with your instructor:

5. Summary of incident. Include dates and times incident(s) occurred. (Use additional paper if needed).

6. Place incident occurred: _____

7. Resolution Sought: _____

I hereby attest the information I have provided is accurate to the best of my knowledge.

Student Signature _____ Date: _____

