Date:		Case #	
	Student Grievance	Intake Form	
	Dean of Students' Office		
N. CO.			
Nature of Grievance: (Dean's office use only)			
,,,			
Name:	Phone:		
Address:	Cell Phone:		
City	StateZip_		
Email Address	Sam ID		
Classification: FR SO IR SR	GRAD Major:		
I am having difficulty with (check	all that applies):		
an office or department	an office or departmenta faculty member		
a university staff member	pera financial matter		
another SHSU studenta student organization	other (please spe	cify)	
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Have you attempted to address y	our concern in the department of o	office where you are having difficulty?	
How were you referred to the Do	ean's office for Assistance?		
self	friend fa	aculty member	
SHSU staff member	Dean of Students websiteS	tudent Services brochure	
Ask the Raven	_other (please specify)		
If self referred, how did you find	out about SHSU student Grievan	ce services?	

In the space provided below, describe the nature of your difficulty. Please include as much detailed information as possible regarding your situation (i.e. names, dates, etc.). Feel free to use the back of the form or additional paper if needed.