

STUDENT CODE OF CONDUCT COMPLAINT FORM



Student Code of Conduct violations may be reported by anyone. Please return the completed form to Linda Hampton, Executive Director of Conduct, Appeals & Compliance, Room J-133, 3300 Macon Tech Dr. Macon, GA 31206, lhampton@centralgategatech.edu, phone: (478) 757-3408, fax: (478) 471-5197. You will be contacted within 5 business days after receipt of this form.

Internal Use Only

Date Received: _____ Initial: _____
Date Resolved: _____ Initial: _____

Student Code of Conduct Violated By:

Name: _____ Telephone: _____ Student ID: _____

Date of Incident: _____ Location of Incident: _____

Other Student (s) Involved:

Name: _____ Telephone: _____ Student ID: _____

Name: _____ Telephone: _____ Student ID: _____

Witness (es): _____ Telephone: _____

Witness (es): _____ Telephone: _____

Description of Incident: *Please include a detailed account of the alleged infraction.*

Previous Attempt: *Please include all previous attempts you have taken to resolve this issue in good faith.*

How would you like to see this issue resolved?

Report Submitted By:

Name: _____ Telephone: _____

Signature

Date