



Notice of Intent to File a Formal Grievance

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| Name: | RU Student ID: |
| | Email Address: |
| Telephone number where you can be reached: | |
| Program/department/school or person about which/whom the grievance is being filed: | |
| Reason(s) for the grievance (See Graduate Student Grievance Procedures” on the Radford University Office of Graduate Affairs website for policy on student grievances before completing this section). (The grievance itself should only be about the process and not the decision itself.) <i>Attach additional sheets as necessary.</i> | |
| Suggested resolution: indicate what you would consider a fair resolution of grievance, with supporting reasons (The potential resolution should only be about the process and not the decision itself.) | |
| By signing below, I verify that I have been unsuccessful in reaching a resolution by working with the parties listed above in the informal grievance process. I also recognize that the falsification of any information, either on this form or at any stage of the grievance process, represents a violation of the Radford University Honor Code. | |
| Signature _____ Date _____ Print/Type Name: | |
| Signature of Department Chair/Director (or designee) _____ Date _____ Print/Type Name: | |

(Distribute copies to the student and all other parties involved.)