



Rudolf Steiner College

Record of Student Grievance: Level I

Please see Grievance Policy for definitions and procedures (available on website).

Student Name: _____ Date of Grievance Submission: _____

Names of all those involved in Grievance &/or Incident: _____

Place of the Incident: _____ Date/Time: _____

Nature of Grievance: _____

Narrative of steps taken to reach resolution: _____

Resolved: Yes No If no, describe next step: _____

Signatures

Student: _____ Date: _____

Dean of Students: _____ Date: _____

Others Involved in Resolution

Name: _____ Title or Position: _____

Signature: _____ Date: _____

Name: _____ Title or Position: _____

Signature: _____ Date: _____

Name: _____ Title or Position: _____

Signature: _____ Date: _____