

COMPLAINT AGAINST A PROGRAM SUBJECT TO ACOTE ACCREDITATION

Please indicate the college/university against which you wish to file a complaint:

INSTITUTION: _____
CITY, STATE: _____

I verify that:

- 1) I have made reasonable efforts to resolve the complaint, or alternatively that such efforts would be unavailing.

Please describe the efforts you have made to resolve the complaint. Please also attach supporting documentation to demonstrate the academic program's complaint or grievance policy has been followed and reasonable efforts made to resolve the complaint, or alternatively information to demonstrate such efforts would be unavailing:

- 2) The complaint is related to accreditation *Standards*

Please sign the complaint and provide your contact information: *(AOTA Accreditation staff will protect the confidentiality of the complaining party unless release of identity has been authorized, or disclosure is required by legal action.)*

Signature _____
Full Name _____
Address _____
City, State, & Zip _____
Telephone _____
E-mail Address _____

Do you grant AOTA staff permission to rel-8(b)-12.3(een)-12.2(aut)-1.1(h7 Tw 5(n)-11u ()Tj 0u7.2(O)-1. f EM84