

## STUDENT GRIEVANCE POLICY AND PROCEDURES

#### PURPOSE OF THE PROCEDURE/INTRODUCTION

DSDT's aim is to ensure that students with a grievance relating to their education or attendance can use a procedure, which can help to resolve grievances as quickly and as fairly as possible.

### **POLICY**

Any Student who feels they have not received adequate, fair treatment in all matters related to; school policies, regulations and procedures in accordance with the current student handbook and student bill of rights may seek consideration through a formal grievance policy.

#### **PURPOSE**

To Provide all students with a means for impartial consideration in grievance procedures.

### **SCOPE**

This policy applies to all students enrolled in the DSDT school no matter the program of study.

## **GUIDELINES AND CHAIN OF COMMAND**

Stage 1: Statement of Grievance- If the student feels that the matter has not been resolved through informal discussions with scheduled instructor/ student meetings, the student should put their grievance in writing to the Director of Administration to further resolve the said issue.

Stage 2: The Grievance Meeting whenever unresolved, the student may request an official grievance be heard by DSDT's Chief Operations Officer. The student must make a request within 3 working days of the incident. Stage 3: The Grievance Meeting- the Director of Administration will respond, in writing, to the statement, inviting the student to attend a meeting where the alleged grievance can be discussed. This meeting should be scheduled to take place as soon as possible and normally 5 working days-notice of this meeting will be provided to the student and they will be informed of their right to be accompanied. Students submitting the appeal electronically will own the responsibility of following up to make sure the grievance was received.

## **PROCEDURE**

Students must take all reasonable steps to attend the meeting, but if for any unforeseen reason the student or the Chief Operations Officer can't attend, the meeting must be rearranged. Should a student companion and or parent/ custodial guardian be unable to attend, then the student must make contact within 10 days of the date of the letter to arrange an alternative date that falls within 15 days of the original date provided. These time limits may be extended by mutual agreement. After the meeting, the Chief Operations Officer hearing the grievance must write to the student informing them of any decision or action and offering them the right of appeal. This letter should be sent within 10 working days of the grievance meeting and should include the details on how to appeal. Upon receipt of the request, the grievance is taken to the DSDT School Director. The School Director will convene and review the grievance and make a decision within 5 working days.

### **APPEAL**

If the matter is not resolved to the students' satisfaction, they must set out their grounds of appeal in writing within 5 working days of receipt of the decision letter. Within 10 working days of receiving an appeal letter, the student should receive a written invitation to attend an appeal meeting. The School Director should take the appeal meeting not involved in the original meeting. After the appeal meeting with the School Director, the School Director must inform the student in writing of their decision within 10 working days of the meeting. Their decision is final.



If conflict is still without resolve, please contact:

Council on Occupational Education 7840 Roswell Road, Building 300, Suite 325 Atlanta, GA 30350 Telephone: 770-396-3898 / FAX: 770-396-3790 www.council.org.

## Or

State of Michigan Department of Licensing and Regulatory Affairs (LARA) P.O. Box 30018
Lansing, MI 48909
Phone Main Line:

517-241-7000 Fax: 517-373-2162 Email: CSCL-Complaints@michigan.gov

Website:

http://www.michigan.gov/documents/lara/Post-Secondary\_Student\_Complaints\_498839\_7.pdf 24



# STUDENT GRIEVANCE FORM

Name of Complainant:	
Address:	
Student Name:	
Phone Number:	
1. Please provide a one or two sentence description of your complaint.	
2. Please describe the nature of your complaint in full detail indicating what happened, when the event occurred and w was involved. If additional space is needed, use the reverse side.	'h¢
3. Indicate when and with whom you have already spoken regarding this grievance and what attempts have been made toward resolution.	3
4. Indicate what specific resolution you are seeking or recommending.	
*I hereby certify that the statements made pertaining to my complaint are truthful and accurate.	
Student Signature of Complainant Date	



## **APPEAL FORM**

Rules cannot be written that will apply to every situation in every business. Therefore, any policy established by DSDT may be appealed due to mitigating circumstances. Anyone wishing to appeal a policy must do so using this form and attach any applicable documentation. Appropriate personnel will review the appeal and a determination will be made. All decisions on appeal are final. Indicate which policy is being appealed below. Appeals regarding an SAP must be made within 15 days of the negative determination.

SAP DeterminationOther:
Attention School Director: I wish to appeal the decision and/or policy of the school regarding the above-indicated manner. The mitigating circumstances and pertinent information relating to the decision or policy are stated below.
Supporting Documentation Attached:YESNO
Student Signature Parent or Guardian (If applicable)  Date
OFFICE USE ONLYAPPEALAPPEAL DENIED  EXPLANATION OF DECISION: REQUIREMENTS OF STUDENT TO ACHIEVE SATISFACTORY ACADEMIC PROGRESS AT THE END OF THE PROBATIONARY PERIOD: