

**Department of Higher Education
61 Woodland Street, Hartford, CT 06105-2326**

**PRIVATE OCCUPATIONAL SCHOOLS APPROVAL
COMPLAINT FORM**

File#: _____

**PLEASE READ THROUGH THIS ENTIRE FORM
BEFORE YOU BEGIN FILLING IT OUT.**

Use this form to record all information about your complaint. Complaint cannot be emailed or faxed to the Department as an original signature is required. The Department cannot process incomplete or unsigned complaints. Once received, a reviewer will be assigned to examine the complaint and will, if necessary, contact you for additional information. The results of a review regarding this complaint will be communicated to you. You should be aware that in order to properly evaluate your complaint and access your records, your name must be revealed to the school during our review.

1. Name of school: _____
2. School Address: _____
3. Your name: _____
4. Your Address: _____
5. Your Phone # _____ Work Phone # _____
6. Date(s) of enrollment at school: from: _____ to: _____
7. Program: _____ Graduated: yes _____ no _____
8. Did you attempt to utilize the school's internal complaint resolution procedures?
Yes, on _____ (date) **or** No
If no, why not?

9. Are you still at this institution? Yes No
If no, please check box which applies: Graduated Terminated Withdrew:
_____ (date)

Please attach a list of all correspondence, telephone, email, and any other contacts you have had with the school in an attempt to resolve this matter. Be sure to include dates of contact and with whom you spoke at the school.

10. Summary of Complaint: -- Check the appropriate box: **PLEASE NOTE: You must provide a brief explanation of each area of concern and the remedy you are seeking next to each place where you have indicated below.**

Quality of Instruction:

What remedy are you seeking?

Advertising:

What remedy are you seeking?

Equipment & Facilities;

What remedy are you seeking?

Tuition Refund:

What remedy are you seeking?

Instructors/Recruiters:

What remedy are you seeking?

Job Placement Activities:

What remedy are you seeking?

Admission Policies, Practices or Procedures:

What remedy are you seeking?

Other:

What remedy are you seeking?

11. Detailed Narrative regarding your complaint:

On a separate sheet of paper, please detail all pertinent data regarding your complaint. Describe the attempts you have made to solve the matter and an explanation of what remedy you are seeking. Attach photocopies of all appropriate documents supporting your complaint. **Do not attach or send us original documents.**

NOTE: This document is a public record and may be shared with the school named in the complaint.

I hereby acknowledge that, by signing this complaint form, I am giving the Commissioner of Higher Education, or his designee, authority to review and secure any or all of my student records in order to appropriately review this complaint.

I hereby declare that the information on this form is true, correct and complete to the best of my knowledge and belief.

12. Student Signature: _____ Date: _____

Send to: Private Occupational School Approval
Department of Higher Education
61 Woodland Street
Hartford, CT 06105

(This form must be on file in order for us to process your complaint.)

POSA CP-2(1-08)

Department of Higher Education
61 Woodland Street, Hartford, CT 06105-2326

CONSENT AND RELEASE FORM
FERPA
(Family Educational Rights & Privacy Act of 1974)
REQUEST FOR COMPLETE STUDENT RECORDS

I, _____ the undersigned, hereby authorize
(PLEASE PRINT FULL NAME)

_____ (hereafter referred to
(PLEASE PRINT NAME OF SCHOOL))

as “the educational institution”) to photocopy and release specifically requested material documents or the complete and entire contents of my student financial, academic, personal and all other records held by the educational institution upon request by the Commissioner of the Department of Higher Education, (or designee). These records may include but not be limited to the following:

1. All Financial Aid Records (records include: status of file, award and disbursement of funds information, Satisfactory Academic Progress status, income information, and any other information contained in the Academic, Admissions, Placement/Career Services, Financial Aid, or any similar file).
2. All Academic/Transcript Records (records include: transcripts, admission and registration information, schedule information, assessment test scores, Satisfactory Academic Progress status, residency information, and any other documentation contained in the academic records).
3. All Student Account Records (records include: amounts due for tuition and fees, sources of payment for tuition and fees, refund information, records hold information as it relates to parking tickets, library fines, financial aid repayments and any other accounts receivable information contained in student account records).
4. Instructor/Classroom Records (records include: attendance records, progress reports, test and homework scores if available).
5. Other (Please Specify)

Please Note: Medical Records and Services for Students with Disabilities records are considered medical records and not covered under the FERPA rules. A separate release form must be obtained for that information.

I acknowledge by my signature that I understand although I am not required to release my records to these individual(s), I am giving my consent to release the information. I understand that this release remains in effect until I revoke such consent in writing and the written

revocation is delivered to the educational institution and processed. I understand that any such revocation shall not affect disclosures previously made by the institution prior to the receipt and processing of any such revocation.

I agree to hold the above educational institution harmless from any and all liability for the release of my records to any entities as specified above or any release of information as requested by accrediting authorities or government agencies.

Date

Print Full Name

Student's Signature

Student ID Number

Send to: Private Occupational School Approval
Department of Higher Education
61 Woodland Street
Hartford, CT 06105