

LRU Grievance Report Form

Please complete the following fields. If you choose to make it anonymous, please understand that our ability to resolve the grievance may be limited.

Last Name:

First Name:

Middle Initial:

Local or Campus Address:

Phone:

Email:

Student I.D. Number (000 Number):

Describe the nature of your complaint including any prior action taken to date (please be detailed in your narrative):

Completed forms should be submitted to:

Becky Sharpe, Administrative Associate for Student Life

LR Box 7484

sharpeb@lr.edu