



STATE OF TENNESSEE
HIGHER EDUCATION COMMISSION
312 ROSA L. PARKS AVE., 9TH FLOOR
NASHVILLE, TN 37234-1102

REQUEST FOR COMPLAINT REVIEW

The Tennessee Higher Education Commission (THEC) Division of Postsecondary State Authorization (DPSA) has authority to review complaints against certain postsecondary educational institutions for purposes of determining whether an institution committed a statutory or rule violation, including whether the institution failed to follow its internal policies. **THEC does not investigate complaints against elementary, middle, or high schools.** Applicable statutes and rules are available at:

- [Tennessee Code Annotated Title 49, Chapter 7, Part 20](#)
- [Rule Chapter 1540-01-02](#)
- [Rule Chapter 1540-01-10](#)

DPSA does **not** have the authority to review complaints alleging a violation of federal laws or rules (including violations dealing with the administration or disbursement of Federal Student Aid, Title IV funding). If you have questions related to your complaint, contact DPSA at (615) 253-8857 before completing this form.

You must complete this form in its entirety, including providing all attachments, before DPSA will consider the complaint to be a formal complaint and begin its investigation. A complainant who submits an incomplete request will be notified of any deficiencies or missing attachments and will have thirty (30) days to supplement the complaint. If the supplement is not received by the stated due date, the complaint will be closed. Once the complaint is complete, it will be sent to the institution for a response.

If you have any questions regarding this form, contact DPSA at (615) 253-8857.

COMPLAINANT INFORMATION	
Complainant Name:	
Address:	
City:	State:
Zip:	County:
Telephone No.:	Email:
INSTITUTION INFORMATION	
Institution Name:	
Address:	
City:	State:
Zip:	County:
The person completing this form is	
<input type="checkbox"/>	A prospective, current, or former student at the institution
<input type="checkbox"/>	A Parent, Guardian, Spouse, or Other
<input type="checkbox"/>	Other, please explain: _____

QUESTIONS AND CONSENT

Has the complainant completed the institutional grievance policy prior to the filing of this complaint?

- Yes
- No

If no, please provide a short explanation in the below text box:

Has the complainant previously contacted the Division of Postsecondary State Authorization (DPSA) about filing a complaint against the institution?

- Yes
- No

Does the complaint involve a particular program?

- Yes
List the name of the program: _____
Does the program lead to a?
 - Certificate of Completion
 - Diploma
 - Associates Degree
 - Bachelor's Degree
 - Other, please specify: _____
- No

By signing this Request for Complaint Review form:

I agree to receive all written communications concerning this complaint by email at the above listed email address, including but not limited to, communications regarding any due dates, requests for additional information, and status updates.

I agree that THEC may send written communications, including attachments, to me, any person named by me, and the institution named above, including any employee, agent, or contractor of the institution, concerning this complaint by email. Such written communications and attachments could include personally identifiable information or educational records, including but not limited to, transcripts, grades, or dates of attendance. THEC will send all emails securely, but **DOES NOT GUARANTEE** that emails sent by others will be sent securely.

- Agree
- Disagree

By disagreeing to emailed communications, all written communications with me and the institution named above concerning this complaint shall be sent by mail. My correct mailing address is listed below. By selecting this option, I acknowledge that all correspondence will be sent by regular mail through the U.S. Postal Service and, as a result, additional time will be required to resolve the complaint.

Mailing Address (Required only if "Disagree" was selected above.)

Address Line 1: _____

Address Line 2: _____

City: _____

State: _____ ZIP: _____

ATTACHMENTS

- 1. DETAILED WRITTEN STATEMENT OF ALL ALLEGATIONS** – Attach a written statement which includes, at a minimum, the following:
- a. numbered allegations, for example, “1. The institution dismissed me improperly because . . .”;
 - b. a detailed description of the events and circumstances upon which the complaint is based;
 - c. the names of all persons involved;
 - d. dates related to the events and circumstances; and
 - e. a reference to any institutional policies that you allege the institution violated. If a complainant does not allege any institutional policies were violated, DPSA will only consider whether applicable rules and statutes were violated.

- 2. SUPPORTING DOCUMENTATION** – Attach a copy of any documentation supporting your allegations, including a copy of institutional policies referenced in the Statement of Allegations.

Check here if you do not have any supporting documentation.

- 3. STUDENT COMPLAINT INFORMATION RELEASE AUTHORIZATION** – Select one of the following:

I am the student and do NOT authorize THEC to communicate with anyone other than the institution named above, including any employee, agent, or contractor of the institution, concerning this complaint. Therefore, I have not submitted the Student Complaint Information Release Authorization. Note that you can submit a Student Complaint Information Release Authorization at any time during the investigation.

I am the student and authorize THEC to discuss my complaint with the individual listed in the attached Student Complaint Information Release Authorization.

I am not the student and have attached the Student Complaint Information Release Authorization signed by _____.

N/A – I am not a student at the institution and my complaint does not involve a particular student.

- 4. PENDING LITIGATION OR COMPLAINT** –Select one of the following:

I have filed litigation in court and have attached a detailed explanation about the litigation, including the case number, the court where the litigation was filed, and a copy of the complaint.

I have filed a complaint with another government agency, other than a court, and have attached a detailed explanation about the complaint, including the name of the agency, the number assigned the complaint, and a copy of the complaint.

I have filed a complaint with the institution’s accreditor and have attached a detailed explanation about the complaint, including the name of the accreditor, the number assigned the complaint, and a copy of the complaint.

I have NOT filed litigation in court or a complaint with an accreditor or other government agency.

Signature of Person Completing This Form: _____

Print Name: _____

Date: _____

To submit your completed Request for Complaint Review, attachments, and supporting documentation send an email to thec.dpsa-application@tn.gov requesting a secure link.

Please keep a complete copy of the form and documentation for your files.