

## Tennessee Higher Education Commission

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### REQUEST FOR COMPLAINT REVIEW

The Tennessee Higher Education Commission (THEC) 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](#)

THEC 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). If you have questions related to your complaint, contact the Regulatory Compliance Division at 615.253.7458.

- **Any student who files a complaint must first exhaust the grievance process at the institution.**
- **Parties to the complaint shall be the complainant and any named institution or agent thereof.**
- **Any complaint shall be commenced within three (3) years of the subject student's withdrawal from or completion of the program or course of enrollment.**

**This form must be completed 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.

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#### COMPLAINANT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ County: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

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#### INSTITUTION INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ County: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

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**The person completing this form is:**

- A Prospective, Current, or Former Student at the Institution
  - Parent, Guardian, Spouse, or Other
  - Other, please explain: \_\_\_\_\_
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**QUESTIONS AND CONSENT**

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

- Yes
- No

**If yes, provide documentation relevant to the complaint including the institution's determination.**

**If no, provide a brief explanation as to why the process was not completed:**

**Has the complainant previously contacted 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
  - Associate Degree Bachelor's Degree
  - Bachelor's Degree
  - Other, please specify: \_\_\_\_\_
  - No
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**RESOLUTION**

**Provide a brief explanation of the resolution you are seeking:**

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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 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 (If selected, read the below statement and complete the mailing address information.)

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

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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**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 under Attachment 1.

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.

4. PENDING LITIGATION –Select one of the following:

I have filed litigation in a court or filed a complaint with another government agency and have attached a detailed explanation about the litigation, including the case number(s) and the court(s) where the litigation has been filed.

I have NOT filed litigation in a court or filed a complaint with another government agency

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**Signature of Person Completing This Form:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Submit your completed Request for Complaint Review, attachments, and supporting documentation to [THEC.RCD@tn.gov](mailto:THEC.RCD@tn.gov). Please include in the subject line "Complaint Against [Institution Name]." You should also include the complaint number in the subject line if you were provided a number.**

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