

State Board of Private Licensed Schools Student Complaint Questionnaire

In order for the State Board of Private Licensed Schools to investigate a complaint, a student must provide the following information:

Name		
Address 1		
Address 2		
City		
State	Zip Code	
Phone		Fax
E-mail		
Program of Study		Dates of Attendance
Institution		
Address 1		
Address 2		
City		
State	Zip Code	
Phone		
Does the so	thool have an established policy and	I procedure for resolving student complaints?
No		
Did you foll	ow the school's grievance procedur	e to resolve your complaint?
Yes		
No		
If no places	avalain	

Please provide the name(s) and title(s) of the school official(s) with whom you have discussed your
concerns in an effort to resolve your complaint. Brief summary of the outcome:
biler summary of the outcome.
In your own words, printed or typed, clearly explain the condition(s) which caused you to file a written complaint. Attach documents which verify your complaint. These documents should include copies of relevant documents and correspondence with school officials. Do not send originals. Please try to present the events and concerns in the order in which they occurred. Please include a final paragraph in
which you identify the action you seek to resolve your complaint. Please attach all sheets together with
this form on top.
(Continue your written complaint on separate sheets and attach them to this form.)
Pursuant to 18 Pa. C.S. 4904(a), and under penalty of perjury, I declare the foregoing to be true and correct to the best of my knowledge. I also grant PDE permission to release my name and complaint details to the institution.
Signature of Complainant Date
Please send your completed questionnaire and supporting documentation to:
State Board of Private Licensed Schools Pennsylvania Department of Education 333 Market Street, 12 th Floor Harrisburg, PA 17126-0333

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For questions, call 717.783.8228 or e-mail ra-pls@pa.gov.