



CSU Bakersfield

Academic Affairs

Office of the Associate Vice President for Academic Programs and
Dean, Undergraduate/Graduate Studies

Mail Stop: 11 EDUC
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(661) 654-3420
(661) 654-6911 FAX
www.csub.edu/academicprograms

Graduate Student Grievance Form Graduate and Post-Baccalaureate Students

A separate procedure is available for students filing a discrimination, harassment, or retaliation complaint. Those procedures and forms may be found online at <http://www.csub.edu/academicprograms/Complaints%20and%20Grievances/index.html>

Student Name: _____ Student ID: _____

Address: _____
Street # & Name City State Zip

Telephone: () _____ Email: _____

Program: _____ Director Name: _____

Description of Request or Grievance: _____

Basis for Request or Grievance: _____

Student Signature: _____ Date: _____

Required Signatures:

All the following **signatures are required**. If you are unable to obtain a signature, indicate the process you have taken to obtain signatures on a separate sheet and attach directly behind this form.

Program Director Signature: _____ Recommend Do Not Recommend

Basis for Recommendation: _____

Dean of School Signature: _____ Recommend Do Not Recommend

Basis for Recommendation: _____

Associate Dean of Graduate Studies Signature: _____ Approved Denied

Basis for Approval/Denial: _____