



**Accrediting Commission for Schools,
Western Association of Schools and Colleges**

Complaint Certification

Name: _____ Date: _____

Address: _____

Telephone (Home): () (Work): ()

Complaint Against (Name of Institution): _____

Address of Institution: _____

Have you contacted the institution and exhausted all grievance/complaint procedures, including direct contact with administrators, district officials, governing board, etc., prior to submitting your complaint to the Accrediting Commission for Schools, WASC?

Yes No

If "Yes," please list meeting dates, individuals involved, topic(s) discussed, and results.

If "No," please provide the reasons why you have not made every effort to resolve this problem with institutional officials prior to requesting outside assistance. (Attach additional pages if necessary.)

Attach any additional supporting documents/evidence to substantiate your claim.

I certify that the information presented above and attached hereto is true, accurate, and complete to the best of my knowledge.

Signature of Complainant

For complaints regarding schools located in California: Mail completed form and all supporting documentation to: Accrediting Commission for Schools, WASC, 43517 Ridge Park Drive, Suite 100, Temecula, CA 92590-3615.

For complaints regarding schools located overseas or in Hawaii: Mail completed form and all supporting documentation to: Accrediting Commission for Schools, WASC, 533 Airport Boulevard, Suite 200, Burlingame, CA 94010-2009.