

Campus Disability Resource Center

Student Grievance Form

As per the [Policy for the Provision of Accommodations and Support Services to Students with Disabilities](#)¹, Section XI, Appeals, Cal Poly Humboldt has adopted a grievance procedure to address student accommodation appeals.

Use this form if you are a STUDENT and you wish to file a grievance based on one of the following:

- You believe you were wrongfully denied a reasonable accommodation that you requested;
- Your approved accommodations were not reasonably or appropriately implemented; and/or,
- You were denied equal access to one or more of Humboldt's programs, activities, or opportunities.

Complaints about harassment or discrimination on the basis of a disability by a STUDENT (EMPLOYEE OR VISITOR), should be submitted using the [Title IX/DHR Report](#)² or may be emailed to [Title IX and Discrimination, Harassment & Retaliation Prevention \(Title IX/DHR\)](#)³. Students may also contact Title IX/DHR via phone at (707) 826-5177.

INSTRUCTIONS

Use this form if you are a STUDENT and you wish to file a grievance based on one of the following:

- You believe you were wrongfully denied a reasonable accommodation that you requested;
- Your approved accommodations were not reasonably or appropriately implemented; and/or,
- You were denied equal access to one or more of Humboldt's programs, activities, or opportunities.

If you need assistance completing this form contact CDRC by emailing the [ADA/504 Coordinator](#)⁴ or by calling CDRC at (707) 826-4678.

¹ Policy for the Provision of Accommodations and Support Services to Students with Disabilities:

https://disability.humboldt.edu/sites/default/files/disability/Documents/PDF_Documents/Policies%20and%20Procedures/aa-2014-08.pdf

² Title IX/DHR Report: https://cm.maxient.com/reportingform.php?CalPolyHumboldt&layout_id=10

³ Title IX and Discrimination, Harassment & Retaliation Prevention (Title IX/DHR): titleix@humboldt.edu

⁴ ADA/504 Coordinator email: ada@humboldt.edu

Student Grievance

*Indicates required field

First Name: *

Last Name: *

Humboldt ID#: *

Humboldt Email: *

Nature of your Grievance: *

I was wrongfully denied a reasonable accommodation that I requested.

My approved accommodations were not reasonably or appropriately implemented.

I was denied equal access to one or more of Humboldt's programs, activities, or opportunities.

Other:

Date of Incident: *

Name and role of person/office involved: *

Please briefly describe what happened (you may also attach a more detailed statement). Include dates and any relevant background. *

What outcome or resolution are you seeking? *

List any other members of the Humboldt community who have been involved:

List any members of the CDRC team who have been involved with this process, so far:

Do you have any supporting documentation? * Yes No

If Yes, it must be attached to this form upon submission.

By submitting this form, I: *

Agree that the information provided above is, to the best of my knowledge, accurate.

Agree to participate in the grievance process in good faith.

Signature:

Date: *

Submission of Form

The form and any supporting documentation may be submitted by:

- Email to the [ADA/504 Coordinator](#)⁵;
- Delivered in person to CDRC, Lower Library, Suite 5; or,
- Mailed via U.S. Postal Service to:
ATTENTION: ADA/504 Coordinator
Campus Disability Resource Center
Cal Poly Humboldt
1 Harpst Street, Lower Library, Suite 5
Arcata, CA 95521

⁵ ADA/504 Coordinator: ada@humboldt.edu