

Form AP-5530-1: Statement of Grievance

Los Angeles Community College District

| Student Name | Student ID Number |
|----------------|-------------------|
| College | Date |
| Street Address | |
| City | |
| State | Zip |
| Phone Number | E-mail |

This grievance is being filed under the procedures in LACCD Administrative Procedure 5530 (Student Rights and Grievances). The purpose of the grievance procedure is to provide a prompt and equitable means for resolving student grievances. A grievance may be initiated by one or more students who reasonably believe he or she or they have been subject to unjust action or denied rights involving their status or privileges as students. It is the responsibility of the students to submit proof of alleged unfair or improper action. Grievances pertaining to grades are subject to California Education Code Section 76224(a).

This grievance procedure does not apply to the following: challenges to prerequisites, corequisites, advisories and limitations on enrollment; alleged violations of sexual harassment; appeals for residency determination; eligibility, disqualification or reinstatement of financial aid; student discipline, freedom of the press; or employee discipline (see AP 5530 for additional information).

When were you subject to unjust action or denied your rights as a student (i.e., date of incident):

Where were you subject to unjust action or denied your rights as a student:

Name the individuals who allegedly took unjust action or denied you your rights involving your status or privileges as student:

State your reason for this grievance:

If this is a grade grievance, have you filed a petition for grade change? (Choose one option.)

Yes No

If this is a grade grievance, indicate on which grounds you believe your grade is incorrect (Choose all that apply):

| Mistake | Fraud |
|-----------|--------------|
| Bad faith | Incompetence |

Explain these grounds (Use additional pages if necessary):

List the policies violated (if applicable):

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State the Remedy or corrective action requested:

The College Ombudsperson has informed me of my rights and responsibilities under AP 5530 and has provided me with a copy of the regulation.

Signature of Student

Date

I have informed the student of his or her rights and responsibilities under AP 5530 and I have given a copy of the regulation to the student.

Signature of Ombudsperson

Date

Date Copy Sent to Respondents: