



Disability Access Services GRIEVANCE FORM

For more information, refer to Administrative Procedure 3.20.01-B.

This form should be used by students when seeking review or reconsideration of an action, inaction, or decision made within Disability Access Services' (DAS) authority. It applies to DAS actions or decisions, such as eligibility for accommodations, denial of accommodation requests, and failure to provide accommodations. This process is not for concerns about instructors, college staff, or other students.

Please Note:

1. Academic complaints should be addressed through the Community Colleges of Spokane's Student Concerns Process.
2. Discrimination complaints based upon disability should follow the process outlined in Administrative Procedure 2.30.01-A for complaints against employees and 3.30.01-A for complaints against students.
3. This grievance process does not preclude or replace a student's right to file action with the Washington State Human Rights Commission and/or the Office for Civil Rights.

If you require assistance completing this form, please contact or visit the DAS Office.

Date _____

Last Name _____ First Name _____

Address _____ City _____ St _____ Zip _____

Phone _____ E-mail _____

Student Identification Number (###-###-####) _____

Grievance Information

Quarter _____ Date of Incident _____

Describe the action that serves as the basis of your grievance (information related to the grievance can be attached):

Campus Contacts

Spokane Community College | 1810 N. Greene St. | Spokane, Washington 99217

E-mail: das@scc.spokane.edu

1. DAS Director: Bldg. 15, Room 113, MS 2151, 509-533-7498
2. Vice President of Student Services: Bldg. 1, Room 228, MS 2150, 509-533-7015

Spokane Falls Community College | 3410 W. Whistalks Way | Spokane, WA 99224-5288

E-mail: disabilitysupportservicesfcc@sfcc.spokane.edu

1. DAS Manager: Bldg. 30, Room 104, MS 3011, 509-533-3437
2. Vice President of Student Affairs: Bldg. 30, Room 225, MS 3010, 509-533-3514