

Student Complaint Form

Texas Workforce Commission – Career Schools and Colleges

DEPT. USE ONLY

School # _____

Please complete all of page 1 & 2 of this form, sign it, and mail to: TWC-Career Schools and Colleges, 101 East 15th Street, Room 226T, Austin, Texas, 78778-0001; fax it to (512) 936-3111; or email it to career.schools@twc.texas.gov. If you wish to confirm receipt, please phone (512) 936-3100.

Unless you reveal your name and address, we are unable to investigate your complaint and may use this form for information only. Please submit a copy of your enrollment agreement with the school and copies of any other documents that may help us substantiate this complaint. **DO NOT SEND ORIGINALS OF ANY DOCUMENTATION.**

Your Full Name at Time of Enrollment	Name of School
Address	School's Address
City	City
State	State
Zip	Zip
Home Phone	School Phone
Work Phone	Program Attended
Social Security Number	Last Date of Attendance (mm/dd/yyyy)
Please list the names and phone numbers of any witnesses or persons who can substantiate your complaint.	
Who else have you contacted regarding this complaint?	
Have you used the school's complaint process? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, why not?	
In your opinion, why was this complaint not resolved at the school?	
How much tuition have you paid? How did you pay this? If loans were used, please list the names of the lenders and account numbers of the loans.	
Describe your complaint in detail. Include names of persons, locations, and dates involved. Please use additional sheets if you need more space. If this complaint is against specific person(s), please list their name and title.	

