



Suggestion/Complaint Referral Form

Lowman Student Center & Student Activities

The purpose of this form and the referral process is to try to direct the suggestion/complaint to the appropriate office or department within the Lowman Student Center so that the best solution can be reached. Please leave this form at the LSC Information Center or LSC Room 303, or mail it to P.O. Box 2389, Huntsville, TX 77341. Thank you.

Date: _____

Name: _____ Phone: _____

Email Address: _____

_____ Student Student ID #: _____

_____ Faculty/Staff Student Classification: _____ Fr _____ So _____ Jr _____ Sr _____ Grad

_____ Other: *please specify*, _____

Nature of Suggestion/Complaint: _____

For Office Use Only

The Lowman Student Center and Student Activities received the following information.

Referral

Referred by: _____ Date: _____

Referred to: _____ Office: _____

Other: _____

Resolution by Office

(To those receiving a suggestion/complaint, the Lowman Student Center & Student Activities Department requests a copy of this form from your office once the process is complete.)

Resolved by: _____ Date: _____

Notes: _____

Lowman Student Center & Student Activities Department Follow-Up Required: _____
