



STANDARD COMPLAINT FORM

Name of Person Completing this Form: _____ Phone: _____

Email Address: _____ Date: _____

Please describe your concern or complaint:

What situation(s) do you believe needs to be addressed and/or resolved?

What would you like to see happen in this situation to bring it to resolution?

Signature: _____ Date: _____

Thank you for submitting a complaint form to The TCS School. We will respond within 10 days.