



TANNER HEALTH SYSTEM  
SCHOOL OF NURSING

## GRADUATE PROGRAM GRIEVANCE DOCUMENT

Student Name \_\_\_\_\_ ID Number \_\_\_\_\_

Students are encouraged to meet informally with the faculty member to discuss concerns directly in an attempt to resolve the issue without further action. Has this meeting occurred between student and faculty member?      NO      YES      DATE \_\_\_\_\_

If a resolution satisfactory to the student does not result from this direct discussion, and if the student perceives that an unfair, unreasonable, or arbitrary action has occurred, a formal grievance may be initiated. Completion and submission of this document indicates the student wishes to begin the formal grievance policy. Once the process is started, the student has 48 hours to initiate a meeting within each step of the grievance policy.

### Student Description of Issue

#### **1. Student – Faculty Discussion**

**Scheduled Meeting Date:**

**Actual Meeting Date:**

**Outcome:**

Signature \_\_\_\_\_  
Faculty

Signature \_\_\_\_\_  
Student

#### **2. Course Coordinator Meeting with Student and Faculty Member**

**Scheduled Meeting Date:**

**Actual Meeting Date:**

**Outcome:**

Signature \_\_\_\_\_  
Course Coordinator

Signature \_\_\_\_\_  
Student

**3. MSN or EdD Program Director Meeting with Student and Faculty Member**

**Scheduled Meeting Date:**

**Actual Meeting Date:**

**Outcome:**

Signature \_\_\_\_\_  
MSN or EdD Program Director

Signature \_\_\_\_\_  
Student

**4. Associate Dean, Tanner Health System School of Nursing Meeting with the Student**

**Scheduled Meeting Date:**

**Actual Meeting Date:**

**Outcome:**

Signature \_\_\_\_\_  
Associate Dean, THS School of Nursing

Signature \_\_\_\_\_  
Student

**5. Dean, Tanner Health System School of Nursing Meeting with the Student**

**Scheduled Meeting Date:**

**Actual Meeting Date:**

**Outcome:**

Signature \_\_\_\_\_  
Dean, Tanner Health System School of Nursing

Signature \_\_\_\_\_  
Student