

BSN Grievance Document

Student Name	ID Number
	crmally with the faculty member to discuss concerns directly shout further action. Has this meeting occurred between NO YES DATE
student perceives that an unfair, unregrievance may be initiated. Complete	dent does not result from this direct discussion, and if the easonable, or arbitrary action has occurred, a formal ion and submission of this document indicates the student e policy. Once the process is started, the student has 48 hours of the grievance policy.
Student Description of Issue	
1. Student – Faculty Discussion Scheduled Meeting Date: Actual Meeting Date: Outcome:	
Signature	Signature
Faculty	Student
2. Course Coordinator Meeting wi Scheduled Meeting Date: Actual Meeting Date: Outcome:	th Student and Faculty Member
Signature	Signature
Course Coordinator	Student

3. BSN Program Director Meeting with Student and Faculty Member Scheduled Meeting Date:

Updated 2-17-23 KD

Actual Meeting Date: Outcome:	
Signature BSN Program Director	SignatureStudent
4. Associate Dean, Tanner Health System Scho Scheduled Meeting Date: Actual Meeting Date: Outcome:	ol of Nursing Meeting with the Student
Signature Associate Dean, THS School of Nursing	SignatureStudent
5. Dean, Tanner Health System School of Nurs Scheduled Meeting Date: Actual Meeting Date: Outcome:	ing Meeting with the Student
Signature	Signature