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 #: __________________________
Student Classification: Fr So Jr Sr Grad

_____ Faculty/Staff
_____ 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: ____________________________
________________________________________________________________________
________________________________________________________________________

Rev. 2/11/03