**Initial Review**

Office of Higher Education

450 Columbus Boulevard, Suite 510

Hartford, CT 06103-1841

[www.ctohe.org](http://www.ctohe.org)

**Note: This is not a complaint form. This is a preliminary collection of facts to familiarize us with what issues prompted you to contact the Office of Higher Education. We do not accept anonymous complaints.**

Student Name:

Street Address:

City:       State:       Zip:

Daytime Phone:

Email:

Institution Name and Address:

Is your issue related to an online program? Yes [ ]  No [ ]

Why are you contacting the Office of Higher Education?

Who are the people/staff at the school with whom you have worked try to reach a resolution?

What is your school’s grievance process?

Have you completed every step of the process prior to contacting us? Yes [ ]  No [ ]

How would you like this matter resolved?

Email the completed form to pcs@ctohe.org