



JANET T. MILLS
 GOVERNOR

PENDER MAKIN
 COMMISSIONER

SARA STUDENT COMPLAINT FORM

This form should be used by any current or former student enrolled in an online degree program who seeks to file a complaint against a degree-granting institution approved to operate under the State Authorization Reciprocity Agreement (SARA).

1. COMPLAINANT INFORMATION

Name of Complainant	
Address	
City/State/Zip Code	
Phone Number	
Email Address	

2. INSTITUTION INFORMATION

Name of Institution	
City, State of Primary Campus	
Complainant's Current Enrollment Status	
Intended Degree & Concentration	
Start Date at Institution	
End Date at Institution <i>(if applicable)</i>	

3. COMPLAINT INFORMATION & SUPPORTING DOCUMENTATION

Have you placed a formal complaint with the host institution? YES NO

- A. Please type on a separate sheet, labeled “Attachment A”, a description of how you exhausted the host institution’s complaint process or why you were unable to engage in the host institution’s appeal process. Submit any supporting documentation demonstrating that you exhausted the appeal process at the host institution, if applicable. Please be aware that the Maine DOE will address complaints only after a student has exhausted the appeals process of the host institution.

- B. Please type on a separate sheet, labeled “Attachment B”, a detailed description of your complaint. Include names, titles, and contact information for all college or university faculty or staff you communicated with about the complaint. Incomplete applications will not be processed.

- C. Please type on a separate sheet, labeled “Attachment C”, your proposed resolution of this complaint.

- D. Submit any additional documentation, such as emails from school officials, transcripts, course syllabi, contracts, brochures, catalogs, tuition bill(s), or any other evidentiary support for your complaint.

SUBMISSION PROCESS:

Please submit this completed, signed form and all attachments to the Maine Department of Education by emailing to Michael Perry, Acting Director of Higher Education & Educator Support Services, at Michael.T.Perry@maine.gov.

4. COMPLAINANT AFFIRMATION

By submitting this form, I affirm that I am a current or former student of the institution named in this document. I agree to allow the Maine Department of Education submit a copy of my complaint and supporting materials to the above-named institution for response. I further authorize the institution to transmit to the Maine Department of Education any of my relevant student records related to this complaint. I certify that the information I have submitted is complete, true, and correct to the best of my knowledge.

Printed Name	
Signature	
Date	