

STUDENT GRIEVANCE NOTIFICATION FORM/학생불평 통지양식

CONFIDENTIAL(비밀유지): TO THE GRIEVANCE HANDLER 불평해소 담당관 귀하

NAME OF STUDENT LODGING THE GRIEVANCE: 학생성명

CONTACT PHONE AND EMAIL: 학생 연락처와 메일주소

Please describe the problem/issue in your own words, with as much detail as possible (e.g: names, dates, times, and actual incidents). 당신의 말로 가능한 자세하게 제기하려는 문제를 써주십시오(예, 이름, 날짜, 시간, 실제 사건들)

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What would you like to see happen as a result of lodging this grievance?

이 불평해소청원을 통하여 얻기를 기대하는 결과는 어떤 것입니까?

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학생사인  
STUDENT'S SIGNATURE:

날짜:  
DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_