

Moored Associates LLC.

Grievance / Complaint Procedure

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The Administration of our schools will receive and process any complaint regarding the conduct of staff members and students or one which sets forth facts that reasonably suggest that staff or students have violated state cosmetology laws or accrediting commission requirements. Complaints must be submitted in writing on the designated form found on our website within 30 days of the incident and must be signed by the complainant. The complaint must state the name of the staff member/student, relevant dates, and describe the action(s) forming the basis of the complaint.

The administration may refuse to process any complaint which is submitted anonymously. Complaints cannot be kept confidential. Information must be obtained from all parties involved to effectively address any allegation made. Complaints must include a written release from the complainant allowing the administration to forward a copy of the complaint including identification of the complainant, to all parties involved.

If additional information is needed, the administration will request it in writing from the complainant. If the requested information is not supplied in 14 days, the complaint will be abandoned and will not be pursued. A committee consisting of at least three staff members not involved in the complaint will investigate a complaint that provides substantial evidence of misconduct or a violation of rules or laws. After investigating the complaint, the committee may recommend one of the following actions and a record will be kept in the student's and staff file:

1. Informal resolution of dispute. This could be accomplished at a meeting of involved parties, mediated by the committee.
2. Disciplinary action at the committee's discretion against staff or students up to and including suspension or termination of employment or enrollment, respectively.
3. Referral of the complaint to the State Board of Cosmetology or NACCAS, if beyond the scope of the committee's ability to resolve conflicts or violations.

Twin City Beauty College
2600 Lincoln Ave.
Saint Joseph, MI 49085
P 269-428-2900

Traverse City Beauty College
920 Hastings
Traverse City, MI 49686
p 231-929-0710

Michiana Beauty College
7321 Heritage Sq. Dr. Ste.160
Granger, IN 46530
p 574-271-1542

Tulip City Beauty College
500 E. 8th St., STE. 500
Holland, MI 49423
p 616-355-5010

Nuvo College of Cosmetology
919 W. Norton Ave.
Norton Shores, MI 49441
p 231-799-1500

Moored Beauty Schools

STUDENT COMPLAINT / GRIEVANCE FORM

Student Name:	Phone Number:
Email:	Student ID:
School:	

1. Please provide a one or two sentence description of your grievance.

2. Please describe the nature of your grievance in full detail indicating what happened, when the event occurred and who was involved. If additional space is needed, use the reverse side.

3. Indicate when and with whom you have already spoken regarding this grievance and what attempts have been made toward resolution.

4. Indicate what specific resolution you are seeking or recommending.

I hereby certify that the statements made pertaining to my grievance are truthful and accurate.

Signature of Student

Date

Authorization to Release Complaint Information

Moored Beauty Schools

As stated in our school policy, complaints cannot be kept confidential. Information must be obtained from all parties involved to effectively address any allegation made. Complaints must include a written release from the complainant allowing the administration to forward a copy of the complaint identification of the complainant, to all parties involved.

I, _____ (complainant) understand that all formal complaints cannot be kept confidential.

By signing this form, I understand that all parties involved in my complaint will receive a copy of my complaint to effectively address any allegation(s) made.

All parties named and/or involved in my complaint are:

- .
- .
- .
- .
- .
- .
- .
- .

Student Printed Name:

Student Signature:

Today's Date:
