

Dongguk University Los Angeles 440 Shatto Place, Los Angeles, CA 90020

Tel: 213 487-0110 www.dula.edu

FACULTY COMPLAINT / GRIEVANCE FORM

(Please submit this form to Dean of Academic Affairs)

Signature:

School of Oriental Medicine

Dongguk University Los Angeles
440 Shatto Place, Los Angeles, CA 90020

Date:

Tel: 213 487-0110 www.dula.edu

Please state your expected resolution. Attach additional sheets if necessary.
I understand that information contained in this complaint/grievance form will be held confidential. Information may be shared with University's officials to conduct a thorough investigation. By signing below, I declare that the information on this complaint/grievance form is true and complete and that any attached documents will not be returned to me. I understand that any misrepresentation of information may result in disciplinary actions, in accordance with University's disciplinary policies.

Upon the University's disposition of your complaint, if you consider that the University has not adhered to its policy or has not been fair in handling your complaint, you may contact:

Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM)

8941 Aztec Drive, Eden Prairie, MN 55347 Phone: (952) 212-2434

> Fax: (952) 657-7068 Web: <u>www.acaom.org</u>

Bureau for Private Postsecondary Education

1747 N. Market Blvd. ste 225; Sacramento, CA 95834

Toll-free: (888) 370-7589 or (916) 574-8900. Fax: (916) 263-1897 www.bppe.ca.gov

California Acupuncture Board

1747 N. Market Blvd, Suite 180, Sacramento, CA 95834 Tel (916) 515-5200, Fax (916)928-2204. www.acupuncture.ca.gov