Office of Student Accessibility Services

Student Accessibility Services Grievance Process

Non-Discrimination Statement

The Board of Trustees and the Administration of Central Carolina Community College (CCCC) commit themselves to positive action to secure equal opportunity regardless of those characteristics. Should a student feel his/her rights under The Americans with Disabilities Act or The Rehabilitation Act of 1973 have been violated, he/she may use this form to submit a complaint to the college.

Accommodation Appeal Form

Students have the right to appeal an accommodation request denial within thirty (30) business days after the initial accommodation decision. First, the student must go to the Coordinator of Student Accessibility Services and attempt to resolve the problem. If an agreement for accommodation is not agreed upon at this stage the student must follow the steps below and complete the Accommodation Appeal Form.

CENTRAL CAROLINA
COMMUNITY COLLEGE

Section 1	
To be completed by: Complainant	
Student Name:	Student ID:
Phone Number:	Email: @cougarmail.cccc.edu
Address:	
Date of First Denial in Section 1 should match Date of First Denial in Section 2 Date of First Denial:	
Please describe the requested accommodation. Include how it specifically relates to your disability in an educational capacity.	
Student Signature:	Date:
Submit the Accommodation Appeal Form with Section 1 completed to the Coordinator of Student Accessibility Services.	

The Coordinator of Accessibility Services will review Section 1 and render a decision to either uphold or amend the accommodation. The Coordinator of Student Accessibility Services records the decision in Section 2 and reports this information back to the student.

CENTRAL CAROLINA
COMMUNITY COLLEGE

Section 2	
To be completed by: Coordinator of Student Accessibility Services	
Date Accommodation Denial Appeal Form was received:	
Date of First Denial in Section 1 should match Date of First Denial in Section 2 Date of First Denial:	
Defense of accommodation denial:	
Amendments to original accommodation:	
Coordinator of Accessibility Services Signature:	Date:

Based on the Coordinator of Accessibility Services decision, the student indicates in Section 3 whether to accept the Coordinator's decision or to continue the appeal process.

Section 3		
To be completed by: Complainant		
Is the above response accepted by you, the complainant?	❒Yes	❒No
Student Signature:	Date:	

CENTRAL CAROLINA COMMUNITY COLLEGE

If the student wishes to continue the appeal process, then the student can appeal the Coordinator's decision to the Dean of Students in Section 4.

Section 4	
To be completed by: Dean of Students	
Date Accommodation Denial Appeal Form was received:	
Finding:	
Recommendations:	
Dean of Students' Signature:	Date:

The Dean of Students will either uphold or overturn the original finding including recommendations on how to proceed. If, after completing Section 5, the student feels that the issue is still unresolved, then the student has the right to appeal the Dean of Students' decision to the Vice President of Student Services

Section 5		
To be completed by: Complainant		
Date Accommodation Denial Appeal Form was received:		
Is the above response accepted by you, the complainant?	❒Yes	❒No
Student Signature:	Date:	

If the Dean of Students' finding is not sufficient to your needs please take this form to the Vice President of Student Services for further review.

CENTRAL CAROLINA
COMMUNITY COLLEGE

The Vice President of Student Services will respond with a decision to uphold the original finding or to overturn the Dean of Admission's decision (Section 6).

Section 6	
To be completed by: Vice President of Student Services	
Date Accommodation Denial Appeal Form was received:	
Final Review Summary:	
Student Signature:	Date:
Vice President of Student Services' Signature:	Date: