

## Student Complaint Form

Student Name: \_\_\_\_\_

ID Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Date: \_\_\_\_\_

### Nature of complaint (please select):

#### Academic

- ☐ Course content
- ☐ Teaching / instruction
- ☐ Assessment / grading
- ☐ Learning environment
- ☐ Access to academic resources
- ☐ Instructor conduct
- ☐ Other (specify): \_\_\_\_\_

#### Non-Academic

- ☐ Student services
- ☐ Administrative decision or procedure
- ☐ Safety concern
- ☐ Facilities / equipment
- ☐ Financial / billing issue
- ☐ Discrimination or harassment
- ☐ Other (specify): \_\_\_\_\_



Students are encouraged to discuss their concerns and complaints via informal conferences with the appropriate administrator or academic supervisor.

Have you attempted to resolve your complaint?

☐ Yes      ☐ No

If yes, please provide any evidence of resolution steps (include dates, times, names, etc.):

Summarize the nature of your complaint using factual information in your narrative.  
You may attach an additional sheet of paper if needed:

Specify the outcome being sought:

The information provided in this Student Complaint Form will be processed in accordance with the General Data Protection Regulation (EU) 2016/679 (GDPR) and applicable Greek data-protection laws. The University is committed to ensuring that your personal data is handled lawfully, fairly, and transparently.

I hereby declare the information on this form is correct, true, and complete to the best of my knowledge. I understand that any misrepresentation of the information may result in disciplinary action.

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_