



CUAbroad Grievance Form

*Please complete this form and return to CUAbroad within
4 weeks of your CUA education abroad program*

Student Full Name:

Student Email Address:

Student Phone Number:

CUAbroad Program:

CUAbroad Program Term & Year:

CUAbroad Faculty Director(s):

Please explain the nature of your CUAbroad program grievance, and indicate which area(s) are most relevant (academic program, faculty director, student participants, host institution, home stays, excursions, etc). Include additional sheets if needed.

I understand that my grievance will be reviewed and kept confidential by CUAbroad and the relevant CUA academic and administrative units, and certify that my statements are an accurate reflection of my education abroad experience.

Student Signature

Date