



111 K Street NE, 10th Floor | Washington, DC 20002
202-796-3228 | www.studentaffairscertification.org

Appeal Requests & Reporting Form

The purpose of this form is for individuals seeking to request an appeal of a Certification Consortium decision as well as for individuals seeking to report a complaint regarding a certification program and/or an individual candidate/certificant. Please access the Certification Handbook for policies and procedures related to appeals, and program and individual complaints. The completed form and all supporting documentation must be returned to the Consortium by email at appeals@studentaffairscertification.org. The information provided within this form will be treated as confidential by the Consortium except as required by law.

Individual Submitting Information

First Name	
Last Name	
Title	
Institution	
Email Address	
Phone Number	

Please check the corresponding box to indicate if you are requesting an appeal and/or registering a complaint. Please then share additional detail in the corresponding section below.

<input type="checkbox"/> Request for Appeal
<input type="checkbox"/> Report Complaint regarding Program
<input type="checkbox"/> Report Complaint regarding Individual Candidate/Certificant

Request for Appeal

Please select the activity for which you are requesting an appeal (check all that apply).

Certification Eligibility

Certification Status

Recertification Eligibility

Other (please describe):

Please explain your reason for requesting the appeal. Be as specific as possible.

Report Complaint regarding Program

Please select the activity for which you are registering a complaint (check all that apply).

Initial application processing

Recertification application processing

Exam scheduling

Exam conditions

Other (please describe):

Please describe the nature of the complaint, supporting information, and the remedy requested. Be as specific as possible.

Report Complaint regarding Individual Candidate/Certificant

Individual Against Whom You are Registering a Complaint

A complaint against an individual candidate/certificant must be submitted in writing via this form and meet the following criteria:

- Made against a candidate or current holder of a Consortium certification
- Specific to a section of the Consortium Code of Ethics (available on the [Consortium website](#))
- Supported by specific evidence

Individual about whom you are filing the complaint

First Name	
Last Name	
Title	
Institution	
Certification ID Number (if available)	

Category for which you are filing a complaint (check all that apply)

<input type="checkbox"/> Violation of Code of Ethics
<input type="checkbox"/> Violation of Certification Policies
<input type="checkbox"/> Other (please describe):

Please describe the nature of the complaint, which code of ethics or certification policy you believe was violated, supporting information, and the remedy requested. Be as specific as possible.