

North Carolina Agricultural and Technical State University University Events Center

COMPLAINT FORM

Student Center, Suite 368 Greensboro, NC 27411 Telephone (336) 285-2580 Fax (336) 334-7131 uec@ncat.edu

	Email Address:		
Address:			
City:	_ State: _	Zip:	Contact Number:
EVENT INFORMATION			
			(Please do not use abbreviations.)
Event Name:			
Facility Used:		Date:	Time:
Please list complaint in detail be	low:		
Signature		Dat	re e
FOR UNIVERSITY EVENTS C	ENTER US	E ONLY	
Date Received: Corrective Action Taken:	I	Received by:	
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