INSPIRE HEALTHCARE TRAINING

Student Complaints & Grievance Form

At Inspire Healthcare Training, we are committed to providing students with a positive educational experience. If you have a concern regarding the school's programs, services, faculty, staff, or policies, we encourage you to bring your concern to our attention so that it may be addressed promptly and fairly.

INFORMAL RESOLUTION

Students are encouraged to schedule a conference with the School Director to discuss concerns and seek an informal resolution. While this step is encouraged, it is not required before submitting a formal written complaint.

FORMAL GRIEVANCE PROCESS

A student may file a formal written complaint with the School Director at any time. Upon receipt, Inspire Healthcare Training will:

- Review and investigate the complaint.
- Take appropriate action, when warranted.
- Provide a written response no later than the 10th business day after receipt.

Texas Workforce Commission (TWC) & Regulatory Information

Inspire Healthcare Training is approved and regulated by the TWC (School Number: **S6876**). The school's Nurse Aide Training Programs are also approved by the Texas Health and Human Services Commission (HHSC). Students should first follow the grievance procedures published in the school's catalog. If dissatisfied with the response, or unable to file with the school, a complaint may be submitted to the TWC.

Mailing Address:
Texas Workforce Commission
Career Schools and Colleges
101 East 15th Street, Room 226T
Austin, Texas 78778-0001

Phone: (512) 936-3100
Filing Info Website:
https://www.texasworkforce.org/careerschools
*Students may also file complaints with other applicable regulatory or accrediting agencies.

OFFICIAL GRIEVANCE FORM FILLABLE SECTION

Student Full Name

_____

Student ID / Last 4 of SSN

_____

Email Address

_____

Phone Number

_____

Program / Course Name (e.g., Nurse Aide)

_____

Current Status

[ ] Active Student [ ] Graduate [ ] Withdrawn / Other

Details of the Grievance

Please describe your concern clearly, including specific dates, names of individuals involved, and any relevant details. (Attach additional sheets if necessary)

Proposed / Desired Resolution

What specific action or outcome are you seeking to resolve this matter?

Student Signature

Date