

District Complaint Form

Name of Complainant:	
Hamo of Complaniant.	
Name of the Campus/Dept. about	
who you are complaining:	
Address:	
Phone Number:	
Email Address:	
Description of Complaint:	
Please be as specific as possible.	

Complaint may be mailed, faxed, or submitted online.

Fax to: (956) 273-1739

Mail To: Office of Communications Complaint Form 904 Juarez St. Laredo, TX 78040 SUBMIT