



For Office Use Only:

Office of the Ombuds
University of Michigan-Flint
Confidential Information Sheet

Thank you for coming to the Office of the Ombuds! Please provide us with some or all of the following information as a way of helping us to understand your situation. If you do not wish to answer a particular question, leave it blank. To maintain confidentiality, you may put the completed form in a campus envelope and give it to the secretary.

Information About You

Name: _____ Student ID: _____
 Phone: _____
 Local Address: _____
 Email: _____

Were you referred to the Office of the Ombuds? No Yes: Referral Source: _____

University Affiliation:

- Student (Major: _____)
- Undergraduate Freshman _____ Sophomore _____ Junior _____ Senior _____
- Graduate/Professional
- Other: Parent _____ Alumnus _____ Faculty _____ Staff _____ Other _____

Your Concerns (use reverse side if necessary)

I wish to speak to the Ombuds about the following (brief statement):

The solution I hope for is:

I have attempted to resolve this matter by speaking to the following people. What have been the results of these attempts?

Signature

Date