



ACADEMY *of* ART UNIVERSITY

FOUNDED IN SAN FRANCISCO 1929

## COURTESY SHUTTLE STUDENT COMPLAINT FORM

Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Contact (email or phone): \_\_\_\_\_

Date of incident: \_\_\_\_\_

Time of incident: \_\_\_\_\_

Location of incident: \_\_\_\_\_

Driver's name: \_\_\_\_\_

Route letter/number: \_\_\_\_\_

Full details and description of incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

After fully completing the form above, deliver your report to the Transportation Department at 79 New Montgomery, room 240, or fax it to 415-618-6295. You may also complete the form and send it as an attachment to [transportation@academyart.edu](mailto:transportation@academyart.edu). Your complaint will be investigated & addressed promptly.

**TRANSPORTATION DEPT. ONLY:**

Dare Received: \_\_\_\_\_ Processed by: \_\_\_\_\_

Action Taken: \_\_\_\_\_  
\_\_\_\_\_