

YESHIVA UNIVERSITY
Office of Disability Services

215 Lexington Avenue, Suite 505
New York, NY 10016
646) 592-4132

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New York, NY 10033
(646) 592-4280

GRIEVANCE APPLICATION

Today's date: _____

Name: _____ School: _____

Phone: _____ E-mail: _____

Date(s) of grievance event: _____

Description of the grievance:

Please return to: Dr. Chaim Nissel, Psy.D.
Vice Provost for Student Affairs
2501 Amsterdam Avenue, Rubin Hall 110
New York, NY 10033
drnissel@yu.edu

For Office Use Only:

Date of meeting with Grievance Committee: _____

Findings by Grievance Committee:
