

**Nondiscrimination/Equal Opportunity
(Complaint Form)**

Date: _____

Name of complainant: _____

School: _____

Address: _____

Phone: _____

Summary of alleged unlawful discrimination or harassment:

Name(s) of individual(s) allegedly engaging in prohibited conduct:

Date(s) alleged prohibited conduct occurred: _____

Name(s) of witness(es) to alleged prohibited conduct: _____

If others are affected by the possible unlawful discrimination or harassment, please give their names: _____

Your suggestions regarding resolving the complaint: _____

Please describe any corrective action you wish to see taken with regard to the alleged unlawful discrimination or harassment. You may also provide other information relevant to this complaint. _____

Signature of complainant

Date

Signature of person receiving complaint

Date

Adopted August 21, 2012
Revised October 9, 2012