

Exhibit: Nondiscrimination/Equal Opportunity (Complaint Form)

Date: _____

Name of complainant: _____

School: _____

Address: _____

Phone: _____

Please check here for allegations of sex-based discrimination and/or sexual harassment. (Note: Investigator will use investigation procedures consistent with allegations of sex-based discrimination and/or sexual harassment).

Summary of the 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.

By signing below, I agree that I am submitting this complaint with a good faith belief that the events occurred as described above.

Signature of complainant Date

Signature of person receiving complaint Date

*Adopted January, 2013.
Revised _____, 2020.*