Discrimination/Harassment Reporting Form

Any person may report discrimination and/or harassent, including sexual harassment, whether or not the person reporting is the person alleged to be the victim of the conduct that could constitute discrimination or harassment. The report may be made in writing or verbally and a report may be anonymous. This form is available for submitting a written report, but is not required. The report may be made at any time in person, by mail, by phone, or by electronic mail to the District's Complaint Managers listed below or to any District employee. Complaints will be addressed under the appropriate board policy.

Cheryl Moore
Assistant Superintendent of Human Resources
Title IX Coordinator/Nondiscrimination Coordinator/Complaint Manager
5500 South Grant Street
Hinsdale Illinois 60521
Phone: (630) 570-8008
Fax: (630) 655-4527
Email: cmoore@hinsdale86.org

Kari Smith
Assistant Superintendent for Student Services
Complaint Manager
5500 South Grant Street
Hinsdale Illinois 60521
Phone: (630) 570-8006
Fax: (630) 655-4527
Email: ksmith@hinasdle86.org

Date: _____

Name: _____

☐ **Student** ☐ **Parent/Guardian** ☐ **Employee** ☐ **Other (please specify):** _____
_____

If a student, specify school and grade: _____

If a parent/guardian or other, provide contact information: _____
_____

Is the person making this report also the victim of the alleged conduct? ☐ Yes ☐ No

Approximate date(s) and time(s) of the alleged conduct: _____
_____
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Location(s) of the alleged conduct: _____
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Description of the alleged conduct, including any related evidence (may use additional pages if needed): _____
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By completing and signing this form, I attest that the information provided is true and accurate to the best of my knowledge. I understand that any person who knowingly makes a false accusation or knowingly provides false information may be subject to disciplinary and/or legal action. I also understand that the district prohibits any form of retaliation against anyone who makes a report of harassment or discrimination in good faith.

Signature: _____   **Date**: _____