

REPORT OF DISCRIMINATION/HARASSMENT

Name of Complainant:

For Students, School Attending:

For Employees, Position and Location:

Address, Phone Number

Email Address:

Date(s) of Alleged Incident(s) of Discrimination/Harassment:

Name of person(s) you believe discriminated against/harassed you or others:

If the alleged discrimination/harassment was toward another, please identify that person:

Please describe in detail the incident(s) of alleged harassment, including where and when the incident(s) occurred. Please note any witnesses that may have observed the incident(s). Please include a description of any past incidents that may be related to this complaint. Attach additional pages if necessary.

Lined area for describing the incident(s).

I certify that the information provided in this report is true, correct and complete to the best of my knowledge:

Signature of Complainant _____ Date _____

Complaint Received By: _____
(Principal or Compliance Officer) Date _____