



## **Discrimination Complaint Form**

Policy 4-401

**Complainant**

**Complainant's Address**

**Complainant's email Address**

**Complainant's Telephone**

**Date Complaint is Submitted**

**Date of Incident**

**Summary of the Complaint** (description of incident or event, including date, place, time)

**Witnesses**

**Complainant's Projected Solution/Resolution**

I certify this complaint is correct and accurate to the best of my knowledge.

Signature

**Date:**