



EQUAL EMPLOYMENT OPPORTUNITY COMPLAINT

Please Print Clearly or Type the Following Information

Your Name: _____ Date: _____

Bldg Site: _____ Job/Title: _____

Address at which you wish to receive confidential mail: _____

Phone No.: (H) (____) _____ - _____ (W) (____) _____ - _____

Name and title of your supervisor:

Type of *Discrimination and Harassment Policy* violation alleged:

- Race
- Color
- National Origin
- Sexual Harassment
- Sexual Orientation
- Gender Discrimination
- Age
- Religion/Creed
- Veteran Status
- Disability
- Retaliation
- Other

Please refer to the *Discrimination and Harassment Policy and Guidelines* or contact the Human Resources Office if you have difficulty completing this form. **You may reach Human Resources at 651-407-7546.**

1. Describe what happened. Include the dates and locations of each incident. If you require additional space, you may attach a page to this form in addition to the statement you give below. Also, please attach any additional documents you think are relevant to your complaint.

2. List the name, job title, phone number, and supervisor for each person you believe may have violated the *Discrimination and Harassment Policy and Guidelines*.

3. List the name, job title, phone number, and supervisor for each person you believe may have pertinent information about the situation.

4. What steps, if any, have you taken to resolve this matter?

5. List the date of contact, name, and job title for the person(s) you contacted in an attempt to resolve this matter.

White Bear Lake Area Schools is an equal opportunity employer. The district takes all allegations of harassment and discrimination seriously. All persons are to be treated with respect and dignity. Sexual violence, sexual advances or other forms of unlawful discrimination or harassment in any form by any pupil, teacher, administrator or other school personnel which creates an intimidating, hostile or offensive environment will not be tolerated under any circumstances.

Please forward this form to: White Bear Lake Area Schools OR Interoffice Mail
Department of Human Resources Dept. of HR
2399 Cedar Avenue
White Bear Lake, MN 55110

Office: (651) 407-7546 Fax: (651) 705-7511

You will be contacted by a representative of the Human Resources Office to obtain additional information as needed. All employees must provide truthful and complete information and cooperate fully with the District in any investigation concerning conduct of employees. The investigation process will be concluded within a reasonable period of time and the results will be communicated to you either verbally or in writing. Although we cannot guarantee complete confidentiality, your concerns will be handled with the utmost discretion.

I hereby state and affirm that the information supplied via this complaint form is true and correct to the best of my knowledge.

Signature: _____ Date: _____

SUPERVISORS: Forward this complaint form via FAX to the Human Resources Office immediately upon receipt.