

**EQUITY COMPLAINT FORM**

**Name of Person Filing the Complaint:**

**Email:**

**Street Address:**

**City: Zip Code: Phone:**

**What do You Believe Was the Reason for the Discriminatory or Harassing Treatment?**

**Race or Color Religion Disability Sex/Gender/Orientation**

**Age Other:**

**Which of the two choices describes the person you are accusing and provide information:**

**Student Where**

**Employee Where**

**Have you filed this complaint with any other agency? Yes No**

**If yes, name the agency and the date filed:**

**Were there any witnesses to the allegation? Yes No**

**Describe the discriminatory or harassing act that occurred. If the complaint involves a policy rather than an act, explain how and why you believe it was discriminatory or harassing. A short statement in your own words is sufficient. You may attach more information and documentation if necessary to give a full explanation.**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

***With my signature, I affirm that the above and/or attached complaint is true to the best of my knowledge and belief:***

**Signature: ` Date:**