



Discrimination/Harassment Reporting Form

Instructions: This form is to be completed by the complainant and submitted to the appropriate office listed below for action. Please type or print legibly.

*For complaints of discrimination or harassment in which a student is the alleged violator, submit this form to the **Vice President for Student Engagement and Advising**.*

*For complaints of discrimination or harassment in which a staff or faculty member is the alleged violator, submit this form to the **Director of Human Resources**.*

Complainant Information

Your Name: _____

Your Status: ___ *Student* ___ *Faculty* ___ *Staff*

Where did the alleged situation or incident occur?

___ On campus ___ Off Campus ___ At a College-sponsored event Date _____

General description of the alleged situation or incident (attach additional sheets if necessary)

How can you be contacted for further information?

Phone: _____ Email: _____

Individual(s) about whom you are complaining

Name(s): _____

His/her/their status: ___ *Student* ___ *Faculty* ___ *Staff*

If faculty or staff, department in which the individual works (if known):

Complainant Signature

Date complaint filed