



**DISCRIMINATION/HARASSMENT COMPLAINT FORM for STUDENTS**

Complainant Name \_\_\_\_\_ Student ID Number \_\_\_\_\_  
Last First MI

Address \_\_\_\_\_  
Street City/State ZIP Code

Home Telephone Number \_\_\_\_\_ Alternate Telephone Number \_\_\_\_\_

Department/Campus \_\_\_\_\_

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1. Date(s) of alleged discrimination/harassment:
  
  2. Name and title of person(s) committing the alleged discrimination/harassment:
  
  3. Basis of alleged discrimination/harassment (race, color, national origin, creed, religion, sex {including pregnancy and marital status}, sexual orientation, gender identity, age, disability, genetic information, veteran status):
  
  4. Description of alleged discriminatory/harassment actions (attach additional pages if necessary):
  
  
  
  
  
  
  
  
  
  
  5. Witnesses:
  
  
  
  
  
  
  
  
  
  
  6. Describe how you believe you were harmed by the alleged discrimination/harassment:
  
  
  
  
  
  
  
  
  
  
  7. Requested remedy:
  
  
  
  
  
  
  
  
  
  
  8. Have you filed this complaint with any other agency?  Yes  No If "Yes", please complete the following:  
Name of Agency \_\_\_\_\_  
Date of Filing \_\_\_\_\_ Status of Complaint \_\_\_\_\_

**Certification:** I certify that the information given above is true and correct to the best of my knowledge.  
Complainant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Step 1 – Academic Dean/Campus Provost Response**

Date Complaint Received \_\_\_\_\_

\_\_\_\_\_

Respondent Signature \_\_\_\_\_ Date \_\_\_\_\_

Distribution: Original - Complainant, Copies – Academic Dean, Campus Provost,, Judicial Officer, AA Officer

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**Step 2 - Judicial Officer Response**

Date Complaint Received \_\_\_\_\_

Respondent Signature \_\_\_\_\_ Date \_\_\_\_\_

Distribution: Original - Complainant, Copies – Judicial Officer, VP Enrollment Services, Academic Dean/Campus Provost, AA Officer

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**Step 3 - Executive Vice-President, Academic Affairs or Designee Response**

Date Complaint

Received \_\_\_\_\_

Respondent Signature \_\_\_\_\_ Date \_\_\_\_\_

Distribution: Original - Complainant, Copies - Executive Vice-President, Academic Affairs, Judicial Officer, VP Enrollment Services/Student Success, Academic Dean/Campus Provost, AA Officer

**Step 4 – President or Designee Response**

Date Complaint Received \_\_\_\_\_

Respondent Signature \_\_\_\_\_ Date \_\_\_\_\_

Distribution: Original – Complainant, Copies – President, Executive Vice-President, Academic Affairs, Judicial Officer, VP Enrollment Services/Student Success, Academic Dean/Campus Provost, AA Officer