File: AC-E-2

## Nondiscrimination/Equal Opportunity (Complaint Form)

Date:
Name of complainant:
School:
Address:
Phone:
Please check here for allegations of sex-based discrimination and/or sexual harassment. (Note: Investigator will use investigation procedures consistent with allegations of sex-based discrimination and/or sexual harassment).
Summary of alleged unlawful discrimination or harassment:
Name(s) of individual(s) allegedly engaging in prohibited conduct:
Date(s) alleged prohibited conduct occurred:
Name(s) of witness(es) to alleged prohibited conduct:

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If others are affected by the possible unlawful their names:	discrimination or harassment, please give
Your suggestions regarding resolving the com	plaint:
Please describe any corrective action you wisl unlawful discrimination or harassment. You mate to this complaint.	
Signature of complainant	Date
Signature of person receiving complaint	Date

Issued: March 2012 Revised: August 2020