



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.

<i>For complaints of discrimination or harassment in which a student is the alleged violator, submit this form to: Associate Vice President for Student Affairs Danna Center 205, Box 013 Fax: 865-3025</i>	<i>For complaints of discrimination or harassment in which a staff or faculty member is the alleged violator, submit this form to: Director of Human Resources Mercy Hall 102, Box 16 Fax: 864-7100</i>
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Complainant Information

Your Name: _____

Your Status: ___ Student ___ Faculty ___ Staff

Where did the alleged situation or incident occur?

___ On campus ___ Off Campus ___ At a University-sponsored event

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

How can you be contacted for further information?

Phone: _____ e-mail: _____

Individual(s) about whom you are complaining

Name(s) _____

His/her/their status: ___ Student ___ Faculty ___ Staff ___ Other: _____

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

Complainant Signature

Date complaint filed