File: AC-E-2

## Nondiscrimination/Equal Opportunity (Complaint Form)

Date:
Name of complainant:
School:
Address:
Phone:
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:
If others are affected by the possible unlawful discrimination or harassment, please give their names:
Your suggestions regarding resolving the complaint:

Please describe any corrective action you wish to see taken with regard to the alleged unlawful discrimination or harassment. You may also provide other information relevant to this complaint.

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Signature of complainant	Date	
Signature of person receiving complaint	Date	

January 12, 2017

Issued: