

DISCRIMINATION / HARASSMENT COMPLAINT FORM
(For complaints based on race, color, religion, age, marital status, national origin, alienage,
ancestry, veteran status, or status as a victim of domestic violence)

Name of the reporter: _____

Name of the complainant/victim: _____

School/program and grade of the complainant/victim: _____

Reporter's relationship to the complainant/victim: _____

Date of the complaint: _____

Date of the alleged discrimination / harassment: _____

Name or names of the alleged discriminator(s) or harasser(s): _____

Location where such alleged discrimination / harassment occurred: _____

Names(s) of any witness(es) to the alleged discrimination / harassment: _____

Detailed statement of the circumstances constituting the alleged discrimination or harassment:

Proposed remedy: _____
