

**METROPOLITAN COMMUNITY COLLEGE
DISCRIMINATION/HARASSMENT COMPLAINT FORM**

Name of COMPLAINANT : _____			
First	Last	Middle	
Street Address: _____			
City: _____	State: _____	Zip: _____	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Phone [work] _____		
	[home] _____		
	[cell] _____		
Status:			
<input type="checkbox"/> Student	<input type="checkbox"/> Employee	<input type="checkbox"/> Other (Please specify) _____	

Reason(s) you believe you were discriminated against or harassed (Check all that apply)			
<input type="checkbox"/> Race	<input type="checkbox"/> National Origin	<input type="checkbox"/> Color	<input type="checkbox"/> Sex / Gender
<input type="checkbox"/> Age	<input type="checkbox"/> Religion	<input type="checkbox"/> Disability	<input type="checkbox"/> Marital Status
<input type="checkbox"/> Sexual Orientation	<input type="checkbox"/> Veteran's Status	<input type="checkbox"/> Retaliation	<input type="checkbox"/> Religion
<input type="checkbox"/> Other (Please specify) _____			
Date discrimination/harassment took place:			
Earliest: _____	Latest: _____	<input type="checkbox"/> Continuing Action	

I believe I was discriminated/harassed/retaliated against by:

Name of RESPONDENT : _____			
First	Last	Middle	
Position / Job Title / Department _____			
Status:			
<input type="checkbox"/> Student	<input type="checkbox"/> Employee	<input type="checkbox"/> Other (Please specify) _____	

Explain your Complaint in detail. Include the following information if known. Add additional pages if necessary. Attach all documents you believe may be helpful in investigating your complaint.

1. Describe the specific incident(s) of discrimination/harassment/retaliation. List times, dates, location, names and title of the person(s) involved in the incident(s).
2. Explain why you believe that you were discriminated/harassed/retaliated against because of your protected class status (race, age, gender, disability, etc.)
3. Provide the names and titles of persons you believe were treated more favorably than you due to your protected class status. List the protected class status (race, age, gender, disability, etc.) of each person.
4. Provide the names, titles, and contact information (phone numbers and addresses) for all potential witnesses you believe possess information about your complaint.