

COMPLAINT OF DISCRIMINATION, HARASSMENT AND/OR RETALIATION

GENERAL INFOR	MATION			
Complainant:				
University Position/Status:		Campu	Campus Phone:	
Mailing Address:				
E-mail Address:				
Respondent:				
Respondent: Campus Phone: Mailing Address:				
Relationship to Complainant: E-mail Address:				
Position/Status of Respondent:				
Respondent's Supervisor's Name:				
TYPE OF COMPLA	AINT □ Informal			
NATURE OF COMPLAINT				
☐ Harassment	☐ Discrimination	on Retaliation		
ALLEGATION BASED ON				
☐ Race or Color	□ Religion	☐ Sexual Orientation	☐ Parental Status	
□ Sex	☐ Disability	☐ Sexual Harassment	☐ Marital Status	
□ Ancestry	□ Veteran Status		☐ Gender Identity	
•		☐ Gender Expression	☐ Stalking	
☐ Sexual Violence	☐ Sexual Exploitation	-	~	
☐ Other, Explain:			_	

COMPLAINT (Describe the nature of your complaint. Include a description, date(s) of the incident(s), and name(s) of witness(es). Attach additional pages if necessary.)

Have you brought your complaint to the attention of any other University Federal agency? \Box Yes \Box No	ity department or State or			
If yes, please state the name of the University department or agency and date:				
CERTIFICATION I certify that the information I have provided on this Complaint Inform accurate to the best of my knowledge or belief.	ation Form is true and			
Signature of Complainant	Date			

In accordance with the Procedures for Resolving Complaints of Discrimination and Harassment (Revised July 1, 2014), a copy of this form should be filed with the Office of Institutional Equity or the Office of the Dean of Students.

This form may also be completed and submitted online at https://publicdocs.maxient.com/reportingform.php?PurdueUniver&layout_id=16.