

3. Please indicate the basis of your complaint. Explain briefly how the alleged behavior falls within the selected category. *(Please attach additional pages as needed)*

Discrimination or harassment **based on race or color (specify)**

Discrimination or harassment **based on national origin/ancestry (specify)**

Discrimination or harassment **based on religion (specify)**

Discrimination or harassment **based on sex (including sex/gender) (specify)**

Discrimination or harassment **based on sexual orientation (specify)**

Discrimination or harassment **based on gender identity and expression (specify)**

Discrimination or harassment **based on disability (specify)**

- Discrimination or harassment **based on age (specify)**
- Discrimination or harassment **based on retaliation (includes retaliation for objecting to discrimination, harassment, workplace violence, or violations of law or public policy) (specify).**
- Discrimination or harassment **based on genetic information (Atypical Hereditary Cellular, or Blood Trait) (specify)**
- Discrimination or harassment **based on veteran or military status (specify)**
- Discrimination or harassment **based on marital status, domestic partnership, or civil union status (specify)**
- Sexual misconduct**, including, sexual harassment, sexual assault, sexual exploitation, gender-based harassment, stalking, and relationship violence (including dating and domestic violence) committed by a current District employee (including faculty and staff, and /or third parties).
- Workplace Violence**, including violence, threats of violence, harassment, intimidation, or disruptive behavior of a threatening nature towards people or property. Please describe if there were any weapons involved, if any medical treatment was provided, if any property was damaged, and if any arrests/restraining orders were made.

4. Please describe each alleged act. For each action, please include the date(s), time(s), and location(s) the act occurred if applicable, the name(s) of each person(s) involved, and why you believe the discrimination or harassment was because of your protected status. Please attach additional sheets as needed.

5. Please provide the name of any person(s) who was present and witnessed the act(s) and his/her contact information.

6. Have you attempted to resolve these allegations/taken any action to stop the alleged behavior? If yes, please summarize the action taken.

7. Please include any additional information or comments.

I am aware that an informal process is available to resolve the complaint, and feel that a formal complaint is appropriate to resolve the allegations in this complaint. I understand that I may have rights to relief under the state and federal laws, and that filing a formal complaint does not necessarily toll or increase the time within which I must file a complaint with the agencies or courts that enforce those laws. I agree to cooperate within reason with any investigation conducted by the District into this matter and I understand that if I am found to have knowingly misstated any material fact in this complaint I may be subject to discipline.

Signed: _____ Date: _____

Your signature for a formal complaint is required.