

## **Appendix C – Harassment and Discrimination Reporting Form**

### **Information about the Complainant**

**Name of Complainant:**

**Contact information of Complainant:**

- **Work #:**
- **Cell #:**
- **E-mail address:**

**NOTE – Contact information will be redacted from any documents provided to the Respondent.**

### **Information about the Respondent(s)**

**Name of Respondent(s):**

**Contact information of Respondent(s) (if known):**

- **Work #:**
- **Cell #:**
- **E-mail address:**

### **Details of the Complaint**

**Please describe in as much detail as possible what transpired during the incident(s), names of parties involved, names of witnesses, date(s), time(s) and location(s) of the incident(s) and any other details.**

### **Documents/Evidence**

**Include details of any known supporting documents (emails, notes, photographs, physical evidence, etc.).**

**I understand and agree that:**

The Appropriate University Official may send a copy of my complaint document to other relevant University officials as may be needed to address the complaint, and that a copy of the complaint will be provided to the Respondent. I further understand that in order to process my complaint under this policy, the Appropriate University Official may need to discuss my complaint with other University officials or persons appointed under this Policy.

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**Complainant Signature:**

**Date of Report:**