

Title IX Discrimination Complaint Form

(including gender equity/sexual harassment/sexual violence)

To file a complaint with the • Z } } o } please complete and mail, email or bring this form to the appropriate office as listed o } Or, you may call the appropriate office to make arrangements for a representative to meet with you there or at another location. If you are unable for any reason to complete this form to meet s

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CORRECTIVE ACTION SOUGHT (Attach additional pages as necessary.) d d , D E d W

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WITNESSES (Relationship - co worker, supervisor, customer, faculty, etc.)

Name Title/Relationship Telephone

Name Title/Relationship Telephone

Name Title/Relationship Telephone

DECLARATION:

I declare under penalty of perjury that the foregoing is true and correct. You email address in lieu of your signature if this complaint is filed via email.

Signature Print Name Date