

The facts and circumstances surrounding the alleged discrimination/harassment are as follows: (Be specific. Include dates, times and places. Attach additional sheet(s) if necessary)

Date: _____ **Time:** _____ (a.m.) (p.m.) **Place:** _____

Explanation of Situation: _____

Individual(s) who witnessed or have knowledge of this situation: (List name, title, relationship, and contact information).

Have you discussed the problem with your immediate supervisor, departmental chairperson, or instructor?

Yes No Other _____

If yes, please provide the date(s), name(s) and relationship of the individual(s) involved in the discussion and the result/response:

Date: _____ Time: _____ Location: _____

Name: _____ Title/Relationship: _____

Result/Response:

How have you been harmed?

Describe the action you desire to rectify the alleged discrimination/harassment:

I certify that the foregoing statements are true and correct to the best of my knowledge. My signature below acknowledges that I have read this document and attest to its content.

Name (Please Print)

Signature

Date

EIC Office Use Only:

File #

Received by:

Name: _____ Signature: _____ Date: _____

(EIC Representative)

Form revised 3/25/2015