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**EEO COMPLAINT FORM**

**SECTION ONE: COMPLAINANT INFORMATION**

Name:

Home Address:

Telephone Number:

Email Address:

Title/Work Position:

**SECTION TWO: RESPONDENT INFORMATION**

Name(s) and title(s) of person(s) you are complaining about and who you believe engaged in discrimination, harassment or retaliation:

**SECTION THREE: ALLEGED DISCRIMINATORY OR RETALIATORY CONDUCT**

State the basis for your EEO complaint (*i.e., discrimination based on race, color, national origin, sex, religion, age, disability, etc., or retaliation for engaging in a protected activity)*:

Describe what happened (use additional pages if necessary):

Explain why you believe these actions were due to discrimination or retaliation:

**SECTION FOUR: WITNESS INFORMATION**

Did anyone see these event(s) or actions filed? \_\_\_ Yes \_\_\_ No

Witness Name(s):

Witness’ Contact information:

**SECTION FIVE: PROPOSED REMEDY**

Describe what you would like to happen to address your concerns:

**CERTIFICATION**

*I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Complainant’s Signature Date