**OFFICE OF INSTITUTIONAL EQUITY AND DIVERSITY**

**DISCRIMINATION/HARASSMENT COMPLAINT REGISTER FORM**

**COMPLAINANT**:

Name: Date:

Status:  Faculty  Staff  Student  Other (please specify)

Department:

Campus Address:

Home Address:

Telephone: (Work) (Other)

PREFERRED contact information (Email and/or Phone):

**ALLEGATIONS**: **Complainant alleges discrimination and/or harassment on the basis of:**

Race  Marital Status

Color  Disability

Religion  Sexual Orientation

Sex/Gender  Gender Identity/Expression

National Origin/Ancestry  Military/Veteran Status

Age (40 years or older)  Genetic Information

Retaliation

Do the allegations involve sexual harassment?  Yes  No

**NATURE OF COMPLAINT**:

Formal  Informal

On the next page, please provide information regarding the complaint you wish to register with this Office by responding briefly and clearly to each of the questions. You may also use a separate sheet of paper, if needed.

Please provide the name(s) and title(s) of the involved individual(s):

Precisely, what was said or done? Please include the date(s) and/or location(s) of the occurrence(s).

Why do you think this (these) incident(s) occurred?

Please provide specific details of any actions you took to address the behaviors (if applicable).

What action do you wish this Office to take as a possible means of correcting the behaviors or bringing about a mutually acceptable condition of this matter?

**Signature: Date:**

*My signature serves as authorization for the Office of Institutional Equity and Diversity to investigate this complaint of harassment and/or discrimination. I am also aware the next two levels of management will be notified of a formal investigation in accordance with Saint Louis University’s Policy on Harassment.*

*I am providing complete information regarding the incident(s) describe in order to assist in a thorough investigation. If there are any additions or changes to information being provided, I will furnish the information within five (5) days.*

Rev. August 2020