

PURDUE

UNIVERSITY

COMPLAINT OF DISCRIMINATION, HARASSMENT AND/OR RETALIATION

GENERAL INFORMATION

Complainant: _____
University Position/Status: _____ Campus Phone: _____
Mailing Address: _____ Home Phone: _____
E-mail Address: _____

Respondent: _____
Campus Phone: _____ Mailing Address: _____
Relationship to Complainant: _____ E-mail Address: _____
Position/Status of Respondent: _____
Respondent's Supervisor's Name: _____

TYPE OF COMPLAINT

Formal Informal

NATURE OF COMPLAINT

Harassment Discrimination Retaliation

ALLEGATION BASED ON

Race or Color Religion Sexual Orientation Parental Status
 Sex Disability Sexual Harassment Marital Status
 Ancestry Veteran Status Genetic Information Gender Identity
 National Origin Age (40 or over) Gender Expression Stalking
 Sexual Violence Sexual Exploitation Relationship Violence
 Other, Explain: _____

COMPLAINT (Describe the nature of your complaint. Include a description, date(s) of the incident(s), and name(s) of witness(es). Attach additional pages if necessary.)

Have you brought your complaint to the attention of any other University department or State or Federal agency? Yes No

If yes, please state the name of the University department or agency and date: _____

CERTIFICATION

I certify that the information I have provided on this Complaint Information Form is true and accurate to the best of my knowledge or belief.

Signature of Complainant

Date

In accordance with the Procedures for Resolving Complaints of Discrimination and Harassment (Revised July 1, 2018), a copy of this form should be filed with the Office of Institutional Equity or the Office of the Dean of Students.

This form may also be completed and submitted online at https://publicdocs.maxient.com/reportingform.php?PurdueUniver&layout_id=16.

Last Revised August 2018