

**Nondiscrimination/Equal Opportunity**  
(Complaint Form)

Date: \_\_\_\_\_

Name of complainant: \_\_\_\_\_

School: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Summary of alleged unlawful discrimination or harassment:

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

Name(s) of individual(s) allegedly engaging in prohibited conduct:

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

Date(s) alleged prohibited conduct occurred:

\_\_\_\_\_

Name(s) of witness(es) to alleged prohibited conduct:

\_\_\_\_\_

If others are affected by the possible unlawful discrimination or harassment, please give their names:

\_\_\_\_\_

Your suggestions regarding resolving the complaint: \_\_\_\_\_

---

---

Please describe any corrective action you wish to see taken with regard to the alleged unlawful discrimination or harassment. You may also provide other information relevant to this complaint.

---

Signature of complainant

---

Date

---

Signature of person receiving complaint

---

Date

**Revised: CASB Overhaul 2014**

**Fremont RE-2 School District**