



Formal Student Discrimination Complaint Form

Last name, First name: _____ **Date:** _____

Student ID#: _____ **Cell#:** _____ **Home#:** _____

Email address: _____

Please add names of people accused of discrimination:

Please provide a detailed description of the alleged discriminatory event below to include the date, time and location relating to the complaint. Include what, if any, other steps you have taken to attempt to address the complaint.

Attach any supporting documentation and/or other information to be considered.

By signing below, I certify that the information I have provided in this statement is my honest recollection of events.

Signature: _____ **Date:** _____