



Discrimination Complaint Form

Office of Student Accountability, Education and Compliance - Student reports brought against another student, a visitor of a student, or a third party acting against a student.

Amanda Blount, Telephone: (863) 680-4474, stephens@flsouthern.edu

Athletic Offices; Jenkins Field House

Employee or Other Individual - An employee, or other individual, should bring reports of harassment or discrimination against any other individual(s) to:

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Use additional sheets of paper, if necessary, to answer the following questions

I) COMPLAINANT INFORMATION:

Check One: Faculty Staff Student Student-Employee Applicant

Other: _____

Name: _____ Cellphone Number : _____

Residential Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____ Gender: _____

Race: _____ Ethnicity

The person is: Faculty Staff Student Other: _____

If Employee, (*students will complete this section if also a student-worker on campus*)

Position/Title: _____ Department: _____

Direct Supervisor: _____ Office Telephone Number: _____

IV) DISCRPTION OF COMPLAINT: Please describe in detail the incident(s) you consider to be discriminatory or retaliatory and why you believe this person discriminated or retaliated against you. Also, please provide the date(s) and locations(s) for each incident including first and last names of individuals involved. Explain why you have contact with these individuals (supervisor, co-worker, faculty, customer, ect.). (*Attach additional pages describing your complaint if necessary.*)

V) COMPLAINT DOCUMENTATION: Do you have any documentation supporting your complaint such as text messages, print screens, or e-mails? If so, please provide copies of the documentation supporting your complaint along with any explanation behind the documentation. ATTACHMENT

VIII) WITNESSES: