

RACIAL HARASSMENT FORMAL COMPLAINT FORM – Form 1

Complainant's Name (Please print)

Complainant's
Position_____

I. FACTS OF INCIDENT:

Name(s) of Alleged Harasser(s), If known_____

Date(s) & Place(s) of
Incident_____ Description of
Harassment Conduct_____

Witness(es) Name(s), If
Known_____

II. PRIOR REPORTING OF INCIDENT:

Has the incident been reported before? _____ Yes _____ No

If "Yes," then when?_____ To whom?_____

What was the resolution?_____

Reason(s) for
dissatisfaction_____

Complainant's Signature_____

Date_____

RACIAL HARASSMENT COMPLAINT APPEAL FORM – Form 2
(Please Print)

Name of Complainant:

Position of Complainant:

Date of Original Complaint: _____

Have you ever appealed this complaint before? YES ____ NO ____

If "Yes," When?

To Whom? _____

What was the decision that you are appealing here?

Why is that decision being appealed?

Signature of Complainant Date