



# Employee Civil Rights Harassment Complaint

Nebo School District maintains a firm policy prohibiting all forms of discrimination and harassment.

SCHOOL/DEPARTMENT: \_\_\_\_\_

**COMPLAINANT INFORMATION:**

Name: \_\_\_\_\_ Home address: \_\_\_\_\_  
Home/cell phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Email: \_\_\_\_\_

**INCIDENT INFORMATION:**

Check the box(es) to indicate the type of conduct you are complaining of:

- Abusive Conduct     Bullying or cyber-bullying     Discrimination     Harassment     Hazing     Retaliation

Check the box(es) to indicate the basis of the conduct:

- Race/color/national origin     Sex/gender     Sexual orientation     Gender identity     Religion  
 Pregnancy     Disability     Age     Status as a veteran     N/A or none

Date & Time of incident: \_\_\_\_\_

Name(s) of respondent(s): \_\_\_\_\_

Location of incident: \_\_\_\_\_

Names of witnesses: \_\_\_\_\_

**Describe the incident(s) as clearly as possible, including what was said (threats, requests, demands, etc.), whether any physical contact occurred, and what force was used (attach additional pages if necessary):**

**Describe the harm caused by the incident(s) described above, including any alleged employment action, hostile work environment, or other adverse effects on your employment (attach additional pages if necessary):**

**Describe the remedy you seek, including any assistance you may need to address the harm described above (attach additional pages if necessary).** [Please note that seeking a particular remedy does not confer authority on the victim to determine the discipline imposed on the alleged respondent. All remedies, including any disciplinary action, are within the exclusive authority and sole discretion of the School District]:

This complaint is based on my honest belief that I have been bullied, discriminated against, or harassed as described above. I hereby represent that the information provided herein is true, correct, and complete to the best of my knowledge.

Complainant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

If the complainant is unable or unwilling to sign this form, provide the following information and sign below.

Name of person completing form: \_\_\_\_\_ Title: \_\_\_\_\_

Reason complainant did not complete and sign form: \_\_\_\_\_

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

### **Information for Persons Filing a Complaint**

#### Overview of Investigative Process

The District Civil Rights Coordinator will be promptly notified of this complaint and will assign an investigator. If additional information from you is needed, you will be contacted for a follow-up interview. The investigation will also include interviews with and written statements from the respondent, witnesses, and others identified as having relevant information.

The investigator will consider all the evidence and will make findings of fact and conclusions as to whether civil rights discrimination or harassment has occurred in violation of Policy GBEB. In the case of policy violation, disciplinary action may be taken against the respondent. Other actions may be taken to address the effects on the complainant and the work environment. To the extent legally permissible, the victim and the respondent will be notified of these decisions.

#### Confidentiality

The investigation will be conducted in a reasonably confidential manner. However, witnesses and others with pertinent information may need to be made aware of the investigation and sufficient facts to elicit their verbal/written statements. The investigator will take measures to protect confidentiality of the victim and the accused, including directing all witnesses to refrain from disseminating information related to the complaint and investigation.

You should also keep the complaint and investigation confidential. Do not attempt to conduct your own parallel investigation or discuss the facts of your complaint with others.

#### No Contact

You should avoid contact with any respondent. This includes written, electronic, verbal, and in-person contact. If contact with a respondent is unavoidable in the workplace, please notify the investigator.

#### Office for Civil Rights

In addition to filing a complaint with the District, you may also contact the U.S. Department of Education, Office for Civil Rights, 1244 Speer Boulevard, Suite 310, Denver, CO 80204-3582; Telephone No. 303-844-5695; Fax No. 303-844-4303; TDD No. 877-521-2172; Email OCR.Denver@ed.gov.

#### **For District Use Only**

*Maintain original at District Office in Civil Rights Coordinator's investigation file.*

*Submit copy to Director of Human Resources.*

*If Respondent is a student, submit copy to Coordinator of Student Services.*