



DISCRIMINATION COMPLAINT FORM for EMPLOYEES & APPLICANTS

NOTE: This form is used for complaints not related to Title IX. Title IX complaint information can be found at (<https://www.dmacc.edu/titleix/Pages/welcome.aspx>).

DEADLINE FOR FILING: Within 15 working days of the day the complainant became aware of, or should have become aware of, the discrimination issue. In no instance may this be later than 300 days from the date of the alleged discriminatory treatment.

Complainant Name _____ Social Security Number _____
Last First MI

Address _____
Street City/State ZIP Code

Home Telephone Number _____ Alternate Telephone Number _____

Title _____ Department/Campus _____
(If Complainant is a DMACC Employee)

1. Date(s) of alleged discrimination:
2. Name and title of person(s) committing the alleged discrimination:
3. Basis of alleged discrimination (race, color, national origin, creed, religion, sex, sexual orientation, gender identity, age, disability, genetic information, actual or potential parental, family or marital status, or veteran status):
4. Description of alleged discriminatory actions (attach additional pages if necessary):
5. Witnesses:
6. Describe how you believe you were harmed by the alleged discrimination:
7. Requested remedy:
8. Have you filed this complaint with any other agency? Yes No If "Yes", please complete the following:
Name of Agency _____
Date of Filing _____ Status of Complaint _____

Certification: I certify that the information given above is true and correct to the best of my knowledge.
Complainant Signature: _____ Date: _____

Step 1 – Provost/Dean/Supervisor Response

Date Complaint Received _____

(A written response must be issued as soon as a reasonable investigation can be conducted but no longer than 45 calendar days from the receipt of the complaint.)

Respondent Signature _____ Date _____

Distribution: Original - Complainant, Copies - Next Higher Authority, AA Officer

Complaint form must be submitted to the Affirmative Action Officer within 5 working days from receipt of the Step 1 response.

Step 2 - Affirmative Action Officer or Designee Response

Date Complaint Received _____

(A meeting with the complainant must be held and a written response issued within 10 working days from receipt of the complaint.)

Respondent Signature _____ Date _____

Distribution: Original - Complainant, Copies - AA Officer, Vice President/Direct Report to the President, Provost/Dean/Supervisor

Complaint form must be submitted to the President within 5 working days from receipt of the Step 2 response.

Step 3 - President or Designee Response

Date Complaint Received _____

(A meeting with the complainant must be held and a written response issued within 10 working days from receipt of the complaint.)

Respondent Signature _____ Date _____

Distribution: Original - Complainant, Copies - AA Officer, Vice President/Direct Report to the President, Provost/Dean/Supervisor