WESTHILL CENTRAL SCHOOL DISTRICT

FORMAL COMPLAINT FORM

RELATED TO ILLEGAL DISCRIMINATION, DISCRIMINATORY HARASSMENT, OR SEXUAL HARASSMENT

If you believe that you have been subjected to harassment, you are encouraged to complete this form and submit it to the Civil Rights Compliance Officer, Westhill Central School District, 400 Walberta Rd, Syracuse NY 13219. You will not be retaliated against for filing a complaint.

If you are more comfortable reporting verbally or in another manner, your employer should complete this form, provide you with a copy and follow its harassment prevention policy by investigating the claims as outlined at the end of this form.

For additional resources, visit: ny.gov/programs/combating-sexual-harassment-workplace

COMPLAINANT INFORMATION

Date:		
Name of Complainant:	 	
Work Address:		
Job Title:		
Select Preferred Communication Method		
SUPERVISORY INFORMATION		
Immediate Supervisor's Name:		
Job Title:		
Work Address:		

COMPLAINT INFORMATION

1. Your complaint of harassment is made about:

Name:	Title:	
Work Address:	Work Phone:	
Relationship to you:	\Box Supervisor \Box Subordinate \Box Co-Worker \Box Other	er
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- 2. Please describe what happened and how it is affecting you and your work. Please use additional sheets of paper if necessary and attach any relevant documents or evidence.
- 3. Date(s) harassment occurred:

Is the harassment continuing? \Box Yes \Box No

4. Please list the name and contact information of any witnesses or individuals who may have information related to your complaint:

The last question is optional, but may help the investigation.

5. Have you previously complained or provided information (verbal or written) about related incidents? If yes, when and to whom did you complain or provide information?

If you have retained legal counsel and would like us to work with them, please provide their contact information.

 Signature:

Return to: Civil Rights Compliance Officer, Westhill Central School District, 400 Walberta Road, Syracuse NY 13219

Received by:

Date: _____