

JATC/AJATC EEO COMPLAINT FORM

SECTION ONE: COMPLAINANT INFORMATION

Name: _____

Home Address: _____

Telephone Number: _____

Email Address: _____

Title/Work Position: _____

SECTION TWO: RESPONDENT INFORMATION

Name(s) and title(s) of person(s) you are complaining about and who you believe engaged in discrimination, harassment or retaliation:

SECTION THREE: ALLEGED DISCRIMINATORY OR RETALIATORY CONDUCT

State the basis for your EEO complaint (*i.e., discrimination based on race, color, national origin, sex, religion, age, disability, etc., or retaliation for engaging in a protected activity*):

Describe what happened (use additional pages if necessary): _____

Explain why you believe these actions were due to discrimination or retaliation:

SECTION FOUR: WITNESS INFORMATION

Did anyone see these event(s) or actions filed? ___ Yes ___ No

Witness Name(s): _____

Witness' Contact information: _____

SECTION FIVE: PROPOSED REMEDY

Describe what you would like to happen to address your concerns: _____

CERTIFICATION

I, _____, certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge.

Complainant's Signature

Date