



Unlawful Title IX/Harassment/Discrimination/Retaliation Complaint Form

NAME:

Last

First

Middle

ADDRESS:

Street or P.O. Box

City

State

Zip

HOME PHONE:

CELL PHONE:

WORK PHONE:

EMAIL ADDRESS:

I AM A: STUDENT STUDENT WORKER FACULTY CLASSIFIED ADMINISTRATOR
SUPERVISOR CONFIDENTIAL APPLICANT OTHER: _____

PLEASE IDENTIFY THE NAME(S) OF THE OFFENDING PERSON(S):

(Please Print. Attach additional pages as necessary)

NAME:

Last

First

Middle

OFFENDER STATUS: STUDENT STUDENT WORKER FACULTY CLASSIFIED
ADMINISTRATOR SUPERVISOR CONFIDENTIAL APPLICANT OTHER: _____

DATE OF MOST RECENT INCIDENT OF ALLEGED DISCRIMINATION: _____

I ALLEGE DISCRIMINATION / HARASSMENT BASED ON THE FOLLOWING CATEGORY:

(you must select at least one)

- Age
- Religion
- Race
- Color
- Ancestry
- Ethnic Group Identification
- National Origin
- Perceived to be in protected category or associated with those in protected category
- Sex/Gender
- Gender Identity/Gender Expression
- Sexual harassment
- Sexual Orientation
- Physical Disability
- Mental Disability
- Retaliation**
- Other _____

Clearly state the basis of your complaint. Describe each incident of alleged discrimination / harassment / retaliation separately. For each incident, provide the following information: 1) date(s) the discrimination action occurred; 2) name of offender(s); 3) what happened; 4) witnesses (if any); and 5) why you believe the harassment / discrimination was based upon the protected categories you indicated above.

****If applicable, explain why you believe you were retaliated against for filing a complaint or asserting your right to be free from harassment / discrimination on any of the above grounds.
(Attach additional pages as necessary.)**

I certify that this information is true and correct to the best of my knowledge.

Signature of Complainant

Date

HOW TO FILE THIS COMPLAINT

Send **Original** to:

Angela R. Hoyt, J.D.
Director, Human Resources and Labor Relations / Title IX Coordinator
Cabrillo College
6500 Soquel Drive
Bldg. 1533A
Aptos, CA 95003
Or by email to anhoyt@cabrillo.edu

You may also file your complaint with the State Chancellor's Office at:
Chancellor's Office, California Community Colleges
1102 Q Street
Sacramento, California 95811-6549
Attention: Legal Affairs Division