



## Sayville Public Schools Discrimination/Harassment Complaint Form

Name of complainant: \_\_\_\_\_ Date submitted: \_\_\_\_\_

Signature of complainant: \_\_\_\_\_

The complainant is: (check all that apply):

\_\_\_\_ an employee, holding the position of \_\_\_\_\_ at \_\_\_\_\_ location

\_\_\_\_ a student, studying \_\_\_\_\_ (subject) at \_\_\_\_\_ location

\_\_\_\_ a parent or community member

\_\_\_\_ other (please specify your relationship with or association to the BOCES)

Complainant Information: Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_  
(please circle the number you would prefer us to call)

Basis of this complaint/grievance:

\_\_\_\_ Perceived/Actual race, color, national origin, ethnic group

\_\_\_\_ Perceived/Actual sex, sexual orientation, gender identity

\_\_\_\_ Disability

\_\_\_\_ Weight or Other Physical Attribute

\_\_\_\_ Perceived/Actual religion, religious practices

\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_ Not sure

Comments:

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Discrimination/Harassment Complaint Form**

Discriminatory or Harassing Actions or Nature of the Discrimination:

1, Date of first alleged discrimination/harassment: \_\_\_\_\_

If a person is involved, the name & description of the person(s) committing actions(s) (use other side if necessary):

\_\_\_\_\_

Description of discrimination/ harassment (use additional paper if necessary):

Witnesses, if any, or others who should be contacted with knowledge important to this investigation (include contact information for each person; use additional paper if necessary):

\_\_\_\_\_

Others you may have discussed this complaint/grievance/incident with, including contact information for each: \_\_\_\_\_

2. If there are several instances of alleged discrimination/harassment incidents, provide the dates & description of those incidents and those involved:

Incident #2: \_\_\_\_\_

Name and/or description of accused:

\_\_\_\_\_

Nature of complaint/grievance:

\_\_\_\_\_

Witnesses, if any, or others who should be contacted with knowledge important to this investigation (include contact information for each person):

\_\_\_\_\_

Others you may have discussed this complaint/grievance/incident with, including contact information for each: \_\_\_\_\_

Remedy, outcome or resolution sought by complainant: \_\_\_\_\_