

CITY COLLEGES OF CHICAGO DISCRIMINATION AND HARASSMENT COMPLAINT FORM

Personal Information [Please I	Print]		
Name		□ Employee □ Student □	Other
Address		Telephone Number:	
		Email Address:	
Incident Information			
Location [Location where incident(s) oc	curred]	Date [Date incident(s) occurred]	
The name of the individual I	am filing this complaint a	against is:	
Name		_ □ Employee □ Student	
Name(s) and telephone number	ber(s) of any known witne	ess(es) to the incident(s):	
Name		_ □Employee □Student	Telephone Number
Name		_ □Employee □Student	Telephone Number
Basis of Discrimination or Hara	assment [Please specify all that	at apply]	
□ Race	☐ Gender	Citizenship	☐ Veteran Status
☐ National Origin	□ Age	Sexual Orientation	☐ Sexual Harassment
☐ Ethnicity	☐ Religion	☐ Marital Status	☐ Retaliation
☐ Disability	☐ Genetic Information	☐ Sexual Assault	☐ Dating/Domestic Violence
☐ Membership or participation in an organization	☐ Pregnancy	☐ Other	
Has an Incident Report been filed	with a CCC Office of Safety	and Security? □Yes □No	If yes, Date:
Has a Police Report been filed? □Yes □No If yes, Date:and Police District:			

District Office of Human Resources Revised 9/18

CITY COLLEGES OF CHICAGO DISCRIMINATION AND HARASSMENT COMPLAINT FORM (continued)

Description of Incident

The facts of the incident(s) which led me to believe I was discriminated against or harassed are as follows:				
Dlagg	e add an additional page if necessary			
Requested Remedy	e add an additional page if necessary			
Note: City Colleges of Chicago will keep all information pertaining to the investigation as confidential complaint, the complainant's name and any written statements submitted may be disclosed to the respondetermines that the safety of the community is at risk, certain confidential information may need to be federal laws) in order to protect the community.	ndent. If City Colleges of Chicago			
Signature Date				

Please return completed form to:

District Office of Human Resources – EEO Office 180 N. Wabash Ave., 2nd floor, Chicago, IL 60601 Fax: (312) 553-3353 email: eeofficer@ccc.edu