



Equal Opportunity Office Complaint Form

I. General Information

I am an Evergreen: ☐ Student ☐ Faculty ☐ Staff ☐ Contractor ☐ Other

Name: _____ Today's Date: _____

Phone: _____ Email: _____

II. Complaint Details

Alleged Offender's (Respondent) Name: _____

This is a complaint of ☐ Discrimination ☐ Sexual Harassment ☐ Other

Please describe the specific incident(s):

❖ WHAT happened: _____

[illegible]

Attach additional paper if necessary.

❖ When (including dates and times for each incident):_____

❖ Where (locations for each incident):_____

❖ Witnesses(Include contact information): _____

III. Employees Only

Have you notified a supervisor? ___Yes ___No

Supervisor's Name: _____

Outcome/Actions Taken: _____

Have you filed a complaint with any other agency? ___Yes ___No Agency: _____

IV. Certification

I affirm all information is accurate and true to the best of my knowledge. This complaint is made in good faith.

Signature

Date

V. Filing Instructions

Complaints may be filed online, by mail, email or in person:

Lorie Mastin, Affirmative Action and Equal Opportunity Officer
Library 3102
2700 Evergreen Parkway NW
Olympia, Washington 98505

mastinl@evergreen.edu

(360) 867-5371

Online form is available at:

<https://forms.evergreen.edu/equal-opportunity-complaint-form>