

CONFIDENTIAL

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LANE COMMUNITY COLLEGE
RACE/ETHNICITY/NATIONAL ORIGIN HARASSMENT COMPLAINT FORM

This section to be completed by the person filing complaint.

Name _____

Address _____ City _____ Zip _____

Telephone _____ Message telephone _____

Department (staff only) _____

Person accused: ☐ Staff ☐ Student

Name _____

Job title _____

Department (staff only) _____

Date of incident(s): _____ Location of incident(s) _____

Attach statement of complaint on separate sheet.

Person(s) with
information about
the complaint:

Name _____

Address _____ City _____ Zip _____

Telephone _____ Message telephone _____

Department (staff only) _____

Name _____

Address _____ City _____ Zip _____

Telephone _____ Message telephone _____

Department (staff only) _____

Was the informal complaint resolution process followed? ☐ Yes ☐ No

Name of trained contact person involved _____

Complainant Signature _____ Date _____

RETURN FORM TO: VP for Instruction and Student Services (students) or Director of Human Resources (staff).

This section to be completed by VP for Instruction and Student Services or Director of Human Resources.

Complaint Received Date _____ Initials _____

Complaint forwarded to investigating VP Date _____ Initials _____

Copies distributed Date _____ Initials _____

This section to be completed by the investigating Vice President.

Vice President’s written notification to accused (within 5 working days after complaint) Date _____ Initials _____

Written notice of findings to complainant (within 20 working days after complaint) Date _____ Initials _____

Written notice of findings to accused (within 20 working days after complaint) Date _____ Initials _____

Attach copy of report and recommendations to this form.

This section to be completed by the President.

Request for hearing received? (within 5 working days after Vice President’s response) ☐ Yes ☐ No

President convenes College Race/Ethnicity/National Origin Harassment Date _____ Initials _____

Hearings Committee. (within 20 working days after receipt of written request)

This section to be completed by the Hearings Committee

College Race/Ethnicity/National Origin Harassment Hearings Committee Report Date _____ Initials _____
(within 10 working days after date of the hearing) Attach copy of report and recommendations.

This section to be completed by the President.

Written notice of findings to complainant and accused by President Date _____ Initials _____

(President’s findings must be hand delivered and/or U.S. postage and be within 10 working days
of receipt of College Race/Ethnicity/National Origin Harassment Hearings Committee confidential hearing report.)

When the final stage of the process
is completed, return this form
and all attachments to the
Director of Affirmative Action.

Copies to: White Dir Hum Res/VP IS/SSvcs
Pink Complainant
Canary Contact Person
Gold Director A.A./E.E.O./Diversity