

Human Resources

282 Champions Way PO Box 3062410
Tallahassee, FL 32306-2410
Phone: 850-645-6519 Fax: 850-645-9504

EOCE Use Only:

Received: _____

Discrimination/Harassment, Sexual Misconduct, and/or Retaliation Complaint Form

Form Instructions:

- This complaint form is for use in conjunction with the University's [Equal Opportunity, Non-Discrimination, and Non-Retaliation Policy](#), [Anti-Sexual Misconduct Policy](#) and/or [Title IX Compliance Policy](#). Please review the applicable policy.
- Complete this form in its entirety, sign and date the final page, and return the form in person, by email, mail, or via fax to the Human Resources- Equal Opportunity Compliance & Engagement Office(EOCE).
- If you have any questions call (850) 645-6519.
- **Attach additional pages, as needed, for questions 4 through 10 and any supporting documents.**

1. Complainant Information

Name _____
Phone # _____ Email Address _____
Title/Position _____ Department _____
Student Classification _____ Major _____
Campus Location: ___Tallahassee ___Panama City Campus ___Ringling/Asolo ___Other: _____

_____ Check if filing on behalf of someone else. Name: _____

2. Affiliation with FSU:

_____ Faculty _____ A&P _____ USPS _____ OPS _____ Student
_____ Applicant _____ Vendor _____ Visitor _____ Other: _____

3. What is the basis of this complaint? Check applicable box(es)

Discrimination/Harassment:

_____ Race
_____ Creed
_____ Color
_____ Religion
_____ National Origin
_____ Age
_____ Disability
_____ Veterans' Status
_____ Marital Status
_____ Sex

Sexual Misconduct/Harassment (including Title IX):

_____ Quid Pro Quo¹
_____ Hostile Environment
_____ Sexual Assault
_____ Dating/Domestic Violence
_____ Sexual Exploitation
_____ Stalking

Retaliation:

_____ Threat of Action
_____ Adverse Employment/Academic Action
_____ Hostile Environment

_____ Other Discrimination/Failure to Report: _____

¹ (A favor/advantage granted/expected, by a person of authority, in exchange/return for a relationship/sexual acts.)

Attach additional pages, as needed, for questions 4 through 7 and any supporting documentation.

4. Respondent Information (person(s) responsible for the alleged action)

Name	Affiliation with FSU	Department	Email Address	Phone Number

5. Witness Information (person(s) who have knowledge or information of the alleged action(s))

Name	Affiliation with FSU	Email Address	Phone Number

6. Date(s) the alleged action(s) occurred:

7. Describe the event(s) surrounding the alleged discrimination/harassment, sexual misconduct, and/or retaliation.

Attach additional pages, as needed, for questions 8 through 10 and any supporting documentation.

8. Describe the impact of the alleged discrimination/harassment, sexual misconduct, and/or retaliation.

9. Have you previously reported the action(s) you believe to be discrimination/harassment, sexual misconduct, and/or retaliation? If so, identify the Agency, office, and/or individual(s), the date(s), and describe the outcome.

10. What remedy or resolution are you seeking?

By signing this complaint form I affirm that, to the best of my knowledge, the information contained herein is true and factual while also establishing consent and release of the above information for the purposes of an investigation. I understand that the completion of this form or the filing of a discrimination, harassment, and/or retaliation complaint does not extend the time for filing a complaint with an outside agency, or in a court of law. Additionally, I understand that the effective date of filing this complaint is the date this form is physically received in the Equal Opportunity Compliance & Engagement Office. I further understand if I knowingly provide false or fraudulent information in a complaint I may be subject to corrective/disciplinary action.

Complainant's Signature

Date

*****Please submit any relevant evidence (emails, texts, pictures, etc.) with this form.**

Note: Upon receipt of this formal complaint form, the Complainant will be contacted to schedule an Information Session - Intake Interview.

Return Form To:

Florida State University - Equal Opportunity Compliance & Engagement Office (EOCE)

Address: 6200 University Center A
Tallahassee, FL 32306-2410

Fax Number: (850) 645-9504

Email Address: hr-eoc@fsu.edu