Discrimination and Harassment Complaint

SECTION 1: INSTRUCTIONS

- ◆ Submit this form to the Office of Human Resources in person at: 10 College Boulevard, Niceville, FL 32578; via fax to (850) 729-6080 or via email to humanresources@nwfsc.edu. Or for students, submit this form to wasta.edu. (Aimee Watts, Interim Dean of Students).
- ♦ form can be requested by calling (850)729-5365
- ♦ Filing an allegation of discrimination or harassment with the College does not preclude an alleger from filing an allegation with an external agency nor does it extend time limits for such complaints.

| SECTION 2: PERSON ALLEGING DISCRIMINATION/HARASSMENT | | | | | | |
|--|-------------------|---|-----------------|-----------------|-----------|-----------------------|
| | | | | | | |
| Full Name: | First | M.I. | Last | | | |
| Phone | | Ema | il Address | | | |
| SECTION 3: F | PERSON AGAINST W | /HOM ALLEGATION OF D | ISCRIMINATION/H | IARASSMENT IS B | EING MADE | |
| | | | | | | |
| Full Name: | First | M.I. | Last | | | |
| Department | | | Title | | | |
| Campus Mail A | ddress (If known) | | | | | |
| Campus Phone (if known) | | | Emai | il Address | | |
| | | onal attachments, describe rith o campus, the names | | | | omplaint. Include any |
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