

Discrimination Complaint Form

Please CLEARLY PRINT the following information:

Last Name:			
First:		MI:	
Home Address:			
City:		State:	Zip Code:
Home Telephone: () _		_ Cell Phone:	()
Title:		Department/Location:	
Office Telephone: ()			
Supervisor/Manager's Nan	ne:		
Supervisor/Manager's Con	tact Number:		
NT	ı believe discriminated against	(D	J 4) .
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Address (work):			
City:		State:	Zip Code:
What is the basis of the al	lleged discrimination? (Circle	only those tha	t apply to your complaint).
Age	Sex (gender)		Mental or Physical Disability
Color	Retaliation		Genetic Information
Sexual Orientation	Ancestry		Religion
Marital Status	Creed		National Origin
Race	Gender Identity and Ex	pression	
What issues are associate	d with your complaint?		
Recruitment	Failure to Hire		Performance Evaluation
Demotion	Discharge		Sexual Harassment
Transfer	Promotion		Working Conditions
Other			

When did the alleged discrimination occur?					
Date:					
Where did the alleged discrimination occur?					
Location:					
Were there any witnesses to the alleged discrimination? Yes No					
If yes, please provide witnesses names and contact number.					
Describe what happened. (Please attach additional pages if necessary or type your response)					

	What corrective action do you believe would address your complaint?					
Have you filed a previous of so, please describe the			erimination? Yes No arred.			
Who did you file this co	omplaint with	?				
BSU ECO Officer	_ MCCR	EEOC	U.S. Dept. of Education, Off	ice on Civil Rights		
Please notify the BSU I the period of this invest		iance Officer (of any changes of address and/or	telephone number during		
I affirm that I have rea belief.	nd the above c		FIRMATION hat it is true to the best of my ki	nowledge, information and		
	nature			Date		
Please forward to: Alanna W. Dennis, Es Equity Compliance Of Charlotte Robinson Ha 14000 Jericho Park Ro Bowie, MD 20715 301-860-3442 (p) 301-860-5800 (f) adennis@bowiestate.e	sq. fficer all oad			Date		
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NOTICE OF YOUR RIGHT TO FILE A COMPLAINT WITH AN EXTERNAL CIVIL RIGHTS ENFORCEMENT AGENCY

Any employee or applicant for employment, who believes that he or she has experienced discrimination, has a right to file a formal complaint with State or Federal agencies listed below. A person does not give up this right when he or she files a complaint with the BSU Equity Compliance Officer. The following State and Federal agencies enforce laws related to discrimination:

• Maryland Commission on Human Relations (MCHR)

6 St. Paul Street, 9th Floor Baltimore, Maryland 21201 Phone: 410-767-8600

United States Equal Employment Opportunity Commission (EEOC)

10 South Howard Street, 3rd Floor Baltimore, Maryland 21201 Phone: 410-962-3932

• United States Department of Education, Office of Civil Rights

The Wanamaker Building 100 Penn Square East, Suite 515 Philadelphia, PA 19107-3323

Phone: 215-656-8541

STATUTORY TIME PERIODS FOR THE TIMELY FILING OF CHARGES OF DISCRIMINATION (MEASURE FROM THE OCCURRENCE OF DISCRIMINATORY ACTION):

- 1. **State Fair Practices/EEO Offices-** within 30 days after first knowledge or reasonably knowing (SPPA§5-211 (b))
- **2. Maryland Commission on Human Relations-** Six (6) months (State Government Article Title 20, Annotated Code of Maryland)
- **3. United States Equal Employment Opportunity Commission-** 180 calendar days from the day the discrimination took place; 300 calendar days if a state or local agency enforces a law that prohibits employment discrimination on the same basis. See the EEOC's website for age discrimination filing guidelines (search *Timeliness* in the EEOC's search engine)
- 4. United States Department of Education, Office of Civil Rights- 180 calendar days after the discrimination occurred

Confidentiality- Information obtained as part of an investigation conducted under this SPPA§5-214 is confidential within the meaning of Title 10, Subtitle 6 of the State Government Article.

<u>AFFIRM</u>	ATION
I affirm that I have read the above notice concerning my rig civil rights enforcement agency at any time before or after Compliance Officer and am aware of my filing deadlines for	I file an internal complaint with the BSU Equity
Complainant's Signature	Date
Equity Compliance Officer or designee	Date