



# PERALTA COMMUNITY COLLEGE DISTRICT UNLAWFUL DISCRIMINATION COMPLAINT FORM

**Name:** \_\_\_\_\_  
Last First

**Address:** \_\_\_\_\_  
Street or P.O. Box City, State Zip:

**Phone:** \_\_\_\_\_  
Home/Cell Email

**I am a:**  Student  Employee  Other: \_\_\_\_\_

**I wish to complain against the following individual(s):**

**Name(s):** \_\_\_\_\_

**District:** \_\_\_\_\_ **College:** \_\_\_\_\_

**Date of most recent incident of alleged discrimination:** \_\_\_\_\_  
*(Non-employment complaints must be filed within one year of the date of the alleged unlawful discrimination.  
Employment complaints must be filed within 180 days of the date of the alleged unlawful discrimination.)*

**I allege discrimination based on the following protected categories:**

- Age  Gender Expression  Marital Status  Military/Veteran Status
- Ancestry  Gender Identification  Medical Condition  Physical/Mental Disability
- Color  Immigration Status  National Origin  Race
- Religion  Retaliation  Sex/Gender  Sexual Orientation
- Ethnic Group
- Other Protected Class (Explain): \_\_\_\_\_

**What would you like the District to do in response to your complaint?**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Clearly state your complaint. Describe each incident of alleged discrimination separately. For each incident, provide the following information:

- 1) date(s) the discrimination action occurred;
- 2) names(s) of individual(s) who participated in discriminatory conduct;
- 3) location of incident;
- 4) what happened;
- 5) witnesses (if any);
- 6) why you believe the conduct was motivated by your protected classification;
- 7) if applicable, explain why you believe you were retaliated against for filing a complaint or asserting your right to be free from discrimination on any of the above grounds.

(Attach additional pages as necessary.)

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I certify that this information is correct to the best of my knowledge.

\_\_\_\_\_  
*Signature of Complainant* \_\_\_\_\_  
*Date*

Name of individual documenting verbal complaint: \_\_\_\_\_

\_\_\_\_\_  
*Title* *Phone* *Email*

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**OFFICE USE ONLY**

Date complaint received: \_\_\_\_\_

\_\_\_\_\_  
*Received by* \_\_\_\_\_  
*Title*