Series 4000: District Employment

4100 Employee Rights and Responsibilities

4104-F-1 Discrimination/Retaliation Complaint Form

Employees, Officers, Contractors, Volunteers, Visitors, or other Non-Students shall use this form to report allegations of discrimination (including unlawful harassment) or unlawful retaliation.

Compliance Officer(s):

Mark Willson, Student Services Director

630. S. Lane St., Blissfield, MI 49228

517-486-2148 ext. 217

mwillson@blissfieldschools.us

Jolene Bills, Middle School Counselor

1305 Beamer Rd., Blissfield, MI 49228

517-486-4420 ext. 4206

jbills@blissfieldschools.us

	Complaint No:			
Complainant's Information				
First Name	Initial	Last Name		
Street Address:				
City, State & Zip:				
Phone:	Email:			
Position Held:				
Supervisor's Name:				
	Complaint Details	3		

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Complaint:				
_				
• • •	nination, harassment, or retalia			
□ Age	☐ Gender	☐ National Origin		
☐ Marital Status	□ Race	□ Pregnancy		
□ Disability	☐ Gender Identity	☐ Sexual Orientation		
☐ Religion	☐ Military Service	☐ Genetic Information		
□ Height □ Sex:	□ Weight □ Other:	☐ Retaliation		
Did the Complainan retaliation to the Supe	•	including unlawful harassment, o		
•				
the Complainant?	snow that a person discrimina	ated, harassed, or retaliated against		
the complainant:				
Known Witnesses:				
Additional sheets or d	locuments may be attached to	this complaint, if necessary.		
What is the best way	to contact you? □ Email □ P	Phone		
Retaliation against a pis prohibited.	person who reports discrimina	tion, including unlawful harassment,		

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Complainant's Signature	Date
Please Print/Type Name	
Internal Use Onl	у
Date outcome of investigation reported to Complain	nant: