WOODLAND PARK PUBLIC SCHOOLS

853 McBride Avenue, Woodland Park, New Jersey 07424

Staff Complaint Form

To be used for Staff Complaints regarding Discrimination, Harassment, Sexual Harassment, Hostile Work Environment and/or Intimidation

Woodland Park Public Schools is committed to fostering and maintaining a safe, supportive and welcoming work environment that is free from discrimination, harassment and intimidation of any kind, including but not limited to that which is based on race, national origin, color, age, disability, religious preference, sex (including non-conformity to gender stereotypes), sexual orientation, and gender identity and/or expression. All employees and applicants for employment have the right and are encouraged to immediately report all instances of discrimination, harassment and intimidation of any kind. In order to facilitate a prompt, thorough and impartial investigation of alleged instances of discrimination, harassment and intimidation, all complainants are strongly advised, but are not required, to file this form with the Affirmative Action Officer. For detailed information on the complaint process, see the Woodland Park Board of Education Policy 1530 and Regulation 1530 - EQUAL EMPLOYMENT OPPORTUNITY COMPLAINT PROCEDURE.

Name:	Job Title:
School:	Department:
Home Address:	_
Home or Cell Phone:	Work Phone:

Name of person(s) you believe engaged in discrimination/harassment/intimidation against you:

Title/Position of person:

Date(s) of Discriminatory/Harassing/Intimidating Action(s):

Alleged Basis of Discriminatory/Harassing/Intimidating Action(s) (circle all that apply):

- Age
- Ancestry
- Affectional/Sexual Orientation
- Color
- Creed
- Disability
- Familial Status
- National Origin
- Gender Identity or Expression
- Marital /Civil Union Status
- Nationality
- Race

- Race Ancestry
- Religion
- Genetic Information
- Sex/Gender (including pregnancy)
- Sexual Harassment
- Violation of district policy
- Retaliation

Please explain why you feel you have been discriminated against/harassed/intimidated (use additional sheets of paper if necessary):

Were the actions or behaviors you are complaining about directed at, or said to, you and/or another party?

- YES
- NO

If yes, provide the name of the person to whom the actions or behaviors were directed.

Was the incident reported to anyone?

- YES
- NO

If yes, to whom and when was it reported?

What remedy or resolution, if any, are you	
seeking?	

If appropriate, as determined by the AA Officer, are you willing to attempt to resolve your complaint through mediation or another alternative dispute resolution (ADR) process?

- YES
- NO

Complainant's Signature: _____ Date: _____