

SOUTHWEST

TENNESSEE COMMUNITY COLLEGE

P.O. Box 780 • Memphis, TN 38101-0780 • (901) 333-5000 • www.southwest.tn.edu

Office of Equity and Compliance

COMPLAINT FORM

If necessary, use additional paper to write your responses to the questions.

I. Complainant Information (please type or print neatly).

Name _____

Current Address _____

(City) (State) (Zip)

Home Phone: _____ Work Phone: _____

Email Address _____ Banner ID: _____

Southwest Tennessee Community College Employee or Student (Check one):

Employee Student Other

II. Name of Person(s) accused of wrong doing?

Name _____

Department _____ Title _____

Address _____ Phone: _____

Name _____

Department _____ Title _____

Address _____ Phone: _____

III. Why do you think the person(s) treated you this way?

IV. Other person(s) who may have more information?

Name _____

Department _____ **Title** _____

Address _____ **Phone:** _____

Name _____

Department _____ **Title** _____

Address _____ **Phone:** _____

V. Statement of Facts

Please describe the particulars of your complaint. Be sure to include the date(s) and act(s) occurred. (If additional space is needed, attach extra sheets, signing and numbering each page.)

VI. If known, please state each law or rule you believe has been violated. (See list below for examples.)

- Title VI of the Civil Rights Act of 1964 (Prohibits discrimination based on race, color, or national origin.)
- Title VII of the Civil Rights Act of 1964 (Prohibits employers for discriminating against employees on the basis of sex, race, color, national origin, and religion.)
- Title IX of the Education Amendment of 1972 (Prohibits sex discrimination against students and employees of educational institutions.)
- Americans with Disability Act (ADA) (Prohibits discrimination against individuals with disabilities in employment, public services, and public accommodations.)
- Other

VII. Supporting Documents

- List all documents and other materials in your possession that are relevant to this complaint. (Initial next to documents if attached to this Complaint form.) _____

- List all documents and other materials relevant to this complaint that are available to you, but are not currently in your possession. State the last known location of the document or material.

Document / Material

Location

- List all documents and other materials that are relevant to this complaint but are not available to you. State the last known location of the document or material.

Document/Material

Location

Print Name of Complainant _____

Signature of Complainant _____

Date _____ Time: _____

Please forward your Complaint to our office by email to
equityandcompliance@southwest.tn.edu,
by fax to 901.333.5038,
or by mail to 737 Union Ave Parrish Bldg. Suite 221
Memphis, TN 38103

*Should you have any questions please contact the
Office of Equity and Compliance at (901) 333.5005.*