



Please explain the specific action(s) or situation(s) that resulted in your allegation(s) that you were discriminated against, (treated differently from other employees or applicants) or harassed based on your protected class (race, color, religion, national origin, sex, age, disability, sexual orientation, etc.) and/or retaliated against.

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Describe why you believe the incident(s) you described was related to your race, sex, age, etc., as you described above, or why you believe that you were retaliated against.

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List and describe all documents, e-mails, records, materials and other evidence pertaining to your complaint.

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Describe the corrective action you are seeking.

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**Acknowledgment**

I understand that, regardless of any contact with the Office of Institutional Equity, I also retain the right to file an external complaint of discrimination or discriminatory harassment with the Connecticut Commission on Human Rights and Opportunities (CHRO), the Equal Employment Opportunity Commission (EEOC) and/or the Office for Civil Rights (OCR). Further, I understand that the relevant timeline for filing with these agencies varies from 180 days to 300 days from the date of the alleged discriminatory or retaliatory act and is independent of any internal complaint filed with the Office of Institutional Equity.

I understand that under state and federal law, as a complainant, I may not be retaliated against for filing a charge of discrimination, participating in an investigation or opposing an unlawful discriminatory practice.

I hereby attest that the facts asserted in this complaint are true and accurate to the best of my knowledge and belief.

\_\_\_\_\_  
Complainant Signature

\_\_\_\_\_  
Date

Upon completion, please return this form and any evidence pertaining to your complaint to:

Office of Institutional Equity  
University of Connecticut  
241 Glenbrook Road – Unit 4175  
Storrs, CT 06269-4175  
Telephone – (860) 486-2943  
Facsimile – (860) 486-6771  
Email – equity@uconn.edu