## Ventura County Community College District Unlawful Harassment/Discrimination Complaint Form for Students

This form is to be completed by either the Complainant or the Unlawful Harassment Intake Facilitator.

Name:	Date:				
Address:	City:		State:	Zip:	
Phone:	Email:				
I am A: X Student at:	_ Moorpark College	Oxnard College	Ventura College		
I wish to complain against:					
Location:Moorpark Colleg		geVentura College			
Is this person a: Studer	nt Employee	Other:			
Alleged Harassment/Discrim	ination based on:	_ Ethnic Group Identification	Disabil	lity Color	
Race Unlawful Ha	arassment Geno	der (includes harassment)	Retaliation	Religion	
Other (please provide expl	anation):		<del></del>	<del></del>	
Have you tried an informal re	esolution?Yes	No Date:		<del></del>	
If so, how?				<del></del>	
Summary of alleged unlawful harassment/discrimination complaint: (Attach additional pages as necessary.)					

Date(s) on which alleged unlawful harassment/discrimination occurred:

(Complaints must be filed within one year of the date of the alleged unlawful discrimination or within one year of the date on which the complainant knew or should have known of the facts underlying the allegation of unlawful discrimination.)

Other employees, students, or others who withessed t	ne allegations (name, address, phone):
Who did you tell these allegations to?	
When?	
To your knowledge, what corrective action, if any, has	s been taken?
	A N.
Have you filed a grievance or complaint with any othe	
If yes, with whom?	
When?	
I understand the District will conduct an investigatio interviewing me, the alleged harasser, witnesses, and	
I certify this information is correct to the best of my kr	nowledge.
Student Compliant Signature:	Date:
Facilitator Signature:	Date:
Submit Form via Email to:	
Oxnard College: ocobian@vcccd.edu	
Ventura College: dpena@vcccd.edu	

Moorpark College: mgarcia4@vcccd.edu

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