

Discrimination Complaint Intake Form

This form may be used by a current or former Binghamton University (BU) student or employee, or by a Third Party, to file a complaint under Section I of SUNY Procedure 6501 alleging Discrimination, Harassment, and/or Retaliation. You do not need to complete this form to report possible Discrimination, Harassment, or Retaliation to BU. Reports may be made verbally or in writing to the appropriate Campus office. A report does not, by itself, constitute the filing of a complaint under Section I. BU will assess reports and respond as appropriate, even when this form is not submitted. BU will determine the procedure applicable to the allegations and will advise you if another campus grievance procedure applies. BU staff are available to assist with completing this form.

Part I — Administrative and Contact Information

Complainant Information:

Your Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Primary Phone #: _____ Additional Phone #: _____

E-Mail address: _____

Your University affiliation (check all that apply):

☐ Faculty

☐ Staff

☐ Graduate Student

☐ Student Employee

☐ Third Party

☐ Undergraduate Student

☐ Other: _____

Person Assisting the Complainant with this Form, if any:

A person may report or refer information concerning possible Discrimination, Harassment, or Retaliation without filing a complaint on behalf of the person alleged to have experienced the conduct. A report or referral does not, by itself, constitute a complaint under Section I by that person. Binghamton University will assess the information and determine the appropriate process, if any, for response.

Name: _____

Relationship to Complainant: _____

Contact information: _____

Respondent Information:

Name of the person who allegedly discriminated (if known): _____

Title (if known): _____

Address: _____

City: _____ State: _____ Zip: _____

Relationship to Complainant, if relevant:

- | | | |
|---|---|---------------------------------------|
| ☐ Supervisor | ☐ Thesis/Dissertation Supervisor | ☐ Coworker |
| ☐ Faculty/Instructor | ☐ Coach | ☐ Student |
| ☐ Advisor | ☐ Clinical Supervisor | ☐ Other: _____ |

University affiliation of person who allegedly discriminated (check all that apply):

- | | | | |
|---|--------------------------------------|---|--|
| ☐ Faculty | ☐ Staff | ☐ Graduate Student | ☐ Undergraduate Student |
| ☐ Student Employee | ☐ Third Party | ☐ Other: _____ | |

Name(s) witnesses or other persons who may have relevant information:

Name: _____ Contact information: _____

Name: _____ Contact information: _____

Name: _____ Contact information: _____

Additional persons may be listed on a separate page.

Have you filed a complaint concerning this matter with an outside agency? ☐ Yes* ☐ No

*If yes: Agency: _____ Date: _____

Have you commenced a lawsuit or other court proceeding concerning this matter? ☐ Yes* ☐ No

*If yes: Court/Tribunal: _____ Date: _____

Case/Index No., if known: _____ Contact information, if known: _____

Note: Filing a complaint with SUNY does not extend any deadline for filing with an outside agency or court

Part II — Charge of Discrimination, Harassment and/or Retaliation

This part constitutes the complaint filed under Section I of SUNY Procedure 6501. A Notice of Investigation and Allegations, which will include information on the Complainant and alleged conduct, will be provided to the Respondent in accordance with Procedure 6501.

What is the nature of the complaint — check all that apply

- | | |
|---|---|
| ☐ Discrimination | ☐ Harassment |
| ☐ Retaliation | ☐ Failure to provide a reasonable accommodation* |
| ☐ Other: _____ | |

*If you are alleging a failure to provide a reasonable accommodation, please identify the basis, if known:

- | | |
|--|---|
| ☐ Disability | ☐ Religion or creed |
| ☐ Pregnancy status, maternity, or breastfeeding | ☐ Transgender status |
| ☐ Sexual violence victim status | ☐ Other: _____ |
| ☐ Unsure | |

What is the protected basis or bases alleged — check all that apply

- | | |
|---|---|
| ☐ Race | ☐ Color |
| ☐ National origin, including shared ancestry and/or ethnic characteristics | ☐ Religion or creed |
| ☐ Sex | ☐ Disability |
| ☐ Age | ☐ Pregnancy or pregnancy outcomes |
| ☐ Gender | ☐ Gender expression |
| ☐ Gender identity | ☐ Predisposing genetic characteristics |
| ☐ Sexual orientation | ☐ Familial status |
| ☐ Marital status | ☐ Military status |
| ☐ Veteran status | ☐ Criminal conviction status/conviction record |
| ☐ Domestic violence victim status | ☐ Citizenship or immigration status |
| ☐ Arrest record | ☐ Reproductive healthcare and autonomy |
| ☐ Other characteristic protected by applicable state or federal law: _____ | ☐ Unsure |

Date of alleged conduct: _____

Most recent date, if more than one incident: _____

Location(s): _____

Is the conduct continuing? ☐ Yes ☐ No ☐ Unsure

If you are a student and the Respondent is a faculty or staff member, does this complaint arise from a supervisory, evaluative, teaching, advising, thesis or dissertation supervision, coaching, clinical supervision, or similar relationship? ☐ Yes* ☐ No ☐ Not applicable

*If yes, has that relationship ended? ☐ Yes** ☐ No

**If yes, date ended: _____

Allegations:

Please describe the conduct you are complaining about and explain why you believe it constituted Discrimination, Harassment, and/or Retaliation. Include any additional facts you believe are relevant. Attach additional pages if necessary.

You may describe any corrective or remedial action you would like Binghamton University to consider. You are not required to identify a particular remedy, and your response does not limit the actions Binghamton University may consider under Procedure 6501.

Interest in Informal Resolution:

Informal resolution is voluntary. The Affirmative Action Officer (AAO) may attempt informal resolution only with the agreement of both the Complainant and Respondent. Indicating interest below does not initiate informal resolution, require Binghamton University or Respondent to participate, or limit your ability to proceed to formal investigation and resolution.

Are you interested in discussing whether voluntary informal resolution may be appropriate?

☐ Yes ☐ No ☐ Unsure

Notices:

Notice Concerning Disclosure: A copy of the Notice of Investigation and Allegations will be provided to the Respondent in accordance with SUNY Procedure 6501. Supporting documents and other evidence should be submitted separately to Binghamton University and are not part of Part II merely because they are submitted in connection with the complaint. Please do not include Social Security numbers, financial account information, medical records, personal contact information, or other sensitive information that is unnecessary to describe the allegations.

Retaliation and Interference: Retaliation against any person for reporting or providing information concerning Discrimination or Harassment, exercising a legal right, or participating in an investigation is prohibited. Concerns regarding retaliation or interference with an investigation should be reported promptly to the Campus AAO or other appropriate Binghamton University officials.

By signing below, I am submitting Part II of this Charge as a complaint under Section I of SUNY Procedure 6501. If another Binghamton University or SUNY process applies to the allegations, Binghamton University will advise me. I affirm that I have read this Charge and that the information provided in Part II is true to the best of my knowledge, information, and belief. I understand that Binghamton University may request additional information as necessary to review or investigate the complaint.

Signature (including electronic signature): _____ Date: _____

Received by: _____ Date: _____