

## GRIEVANCE COMPLAINT FORM

**INSTRUCTIONS:** This form is not viewed as an official grievance unless it is signed. It is the responsibility of this office to investigate any complaints. This form is used for discrimination based on federal and state statutes, as well as for other types of grievances.

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Department: \_\_\_\_\_ Position Title: \_\_\_\_\_  
 UVID #: \_\_\_\_\_ Reports to: \_\_\_\_\_

Status (Check all that apply):

Exempt       Faculty       Applicant  
 Nonexempt       Staff       Other \_\_\_\_\_

Full-time  
 Part-time

Type of Discrimination/Complaint (Check all that apply):

Race       Religion       Disabled Veteran\*       Disability  
 Sex       Color       National Origin       Sexual Harassment  
 Age       Retaliation       Veteran of Vietnam Era       Other

\*Date and nature of discharge:

\_\_\_\_\_

\_\_\_\_\_

Provide information pertaining to those you feel have discriminated against you.

<u>Name</u>	<u>Title</u>	<u>Department</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Briefly explain how you and/or other persons were treated differently and list date(s) of violations:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What action(s) do you feel are necessary to remedy this treatment? \_\_\_\_\_

\_\_\_\_\_

What actions have you taken externally to resolve this issue? \_\_\_\_\_

\_\_\_\_\_

I affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. I have been told the procedures, time constraints and external avenues of redress that are available to me.

\_\_\_\_\_  
 Signature of Charging Party

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature, Executive Director of Human Resources/Equity Officer

\_\_\_\_\_  
 Date

## Filing a Discrimination Complaint

### I. Internal Filing of a Discrimination Complaint

Employees and students are strongly encouraged to follow the Institution's grievance procedure. Copies of this procedure are published in the employee handbook, are posted in various location on campus, on the internet, and from the Human Resource Services Office. For details, contact the Human Resources Executive Director/Equity Officer.

### II. External Filing of a Formal Complaint

#### A. Employment discrimination based on race, color, sex, pregnancy, childbirth, or pregnancy related conditions, age, religion, national origin or disability:

Utah Anti-Discrimination Act of 1965, as amended; Title VII of the Civil Rights Act of 1964, as amended; The Age Discrimination in Employment Act of 1967, as amended; The Americans with Disabilities Act of 1990, as amended (Title I) ; The Equal Pay Act of 1963, as amended; and/or Individual Employment Complaints – File charge within 180 days; 2 years for equal pay to:

State of Utah  
Industrial Commission  
Anti-Discrimination Division  
160 East 300 South  
P.O. Box 146630  
Salt Lake City, UT 84114-6630

Phone: (801) 530-6801

#### B. Employment discrimination other than race, color, sex, pregnancy, childbirth, or pregnancy related conditions, age, religion, national origin or disability:

Executive Order #11246, as amended (Affirmative Action); 38 USC 2011-2014, Vietnam Era Veterans Readjustment Assistance Act of 1974; Fair Labor Standards Act; and/or Class Action Employment Complaints – File charge within 180 days to:

Office of Federal Contract Compliance Programs (OFCCP)  
10 West Broadway, Suite 305  
Salt Lake City, UT 84101

Phone: (801) 524-4470

#### C. Program and/or Activities Discrimination Complaints:

Title VI, Civil Rights Act of 1964; Title IX, Education Amendments of 1972; The Americans with Disabilities Act, as amended (Title I); and/or Section 303, Age Discrimination Act of 1975 – File charge within 180 days with the Federal Department funding the program and/or activity. For specific information contact:

U.S. Department of Education  
Office for Civil Rights  
1244 Speer Blvd., Suite 300  
Denver, CO 80204-3582  
(303) 844-5695

Regional Director  
Department of Health and Human Services  
1961 Stout Street  
Denver, CO 80294  
(303) 844-3372