

University of California and UC Merced policies prohibit discrimination/harassment/retaliation on the basis of race, color, national origin, religion, sex, gender, gender expression, gender identity, pregnancy, physical or mental disability, medical condition, genetic information, ancestry, marital status, age, sexual orientation, citizenship or status as a covered veteran. (Nondiscrimination & Affirmative Action Policy:

<http://policy.ucop.edu/doc/4000376/NondiscrimAffirmAct>)

Every member of the community should be aware that the University prohibits sexual violence and sexual harassment, retaliation, and other prohibited behavior ("Prohibited Conduct") that violates law and/or University policy. The University will respond promptly and effectively to reports of Prohibited Conduct and will take appropriate action to prevent, to correct, and when necessary, to discipline behavior that violates this policy on Sexual Violence and Sexual Harassment. (Sexual Violence and Sexual Harassment Policy: <http://policy.ucop.edu/doc/4000385/SVSH>)

Staff, faculty, students, and applicants for employment who believe they may have been discriminated/harassed/retaliated against are encouraged to bring their concerns to the EEO/AA/Title IX Officer to investigate and attempt to resolve the complaint.

Name: _____ Date: _____

Phone: _____ Email Address: _____

Affiliation: ☐ Staff ☐ Faculty ☐ Applicant ☐ Student ☐ Student Employee

DETAILS OF COMPLAINT *(Please check all appropriate items):*

Sexual Violence/Harassment

- ☐ Sexual Harassment
☐ Dating Violence
☐ Domestic Violence
☐ Sexual Assault
☐ Stalking
☐ Other Sexual Violence

Discrimination

- ☐ Age ☐ Gender Expression ☐ Pregnancy
☐ Ancestry ☐ Gender Identity ☐ Race
☐ Citizenship ☐ Genetic Information ☐ Religion
☐ Color ☐ Marital Status ☐ Sex
☐ Disability ☐ Medical Condition ☐ Sexual Orientation
☐ Gender ☐ National Origin ☐ Veteran Status

Other

- ☐ Hostile Work Environment
☐ Retaliation
☐ Other:

Date(s) most recent or continuing discrimination/harassment/retaliation took place (month, day & year):

Clearly state your complaint. Describe each incident of alleged discrimination/harassment separately. For each action provide the following information: 1) Name of individual(s) who discriminated/harassed; 2) what happened; 3) where it happened; 4) witnesses (if any); and 5) Why you believe the discrimination/harassment situation took place. (Please attach additional pages as necessary)

What would you consider to be a successful or acceptable outcome and/or resolution to your complaint?

I certify that this information is correct to the best of my knowledge.

Signature of Complainant

Date

CONTACT INFORMATION

[Michael Salvador](#)
Director of Compliance
Office of Campus Compliance
University of California, Merced
Phone: (209) 285-9510

MAIL COMPLAINT TO:

Attn: Michael Salvador
Office of Campus Compliance
University of California, Merced
5200 North Lake Road
Merced, CA 95343

OR EMAIL COMPLAINT TO:

msalvador2@ucmerced.edu

OR FILE COMPLAINT ONLINE:

<http://dsvp.ucmerced.edu/reportform>

FOR COMPLIANCE PERSONNEL ONLY Date of complaint: _____ Date received by EEO Office: _____
Additional Comments: