



Lisa Zanussi, Director
OFFICE OF EQUAL OPPORTUNITY SERVICES

OFFICE OF EQUAL OPPORTUNITY SERVICES **COMPLAINT FORM**

INSTRUCTIONS FOR COMPLETION

The Office of Equal Opportunity Services (OEOS) is available to employees, students, and the community to address issues of discrimination and harassment based upon a protected class. OEOS also addresses issues of sexual harassment and retaliation for participating in a protected activity.

By completing the complaint form, you are providing us with important information that will be used to determine whether or not your issues have the necessary elements to establish a civil rights claim.

To establish a civil rights claim, the following three elements must be included in your statement on Page 4:

- Your protected group status (i.e. race, color, religion national origin, physical or mental disability, age, gender/sex, sexual orientation, gender identity, marital status, ancestry, pregnancy, veterans status, or medical condition) or claim of sexual harassment or retaliation for participating in a protected activity
- The incident/situation which you believe to be discriminatory
- A comparison of the treatment you received as a member of a protected group to other individuals who are similar situated, but who are not members of your protected group (doesn't apply sexual harassment).

OEOS has the responsibility for investigating complaints when an individual alleges prohibited conduct or wrongdoing related to discrimination of a protected class as identified in APS Board Policies and Procedural Directives. The internal complaint process is not a legal proceeding and is one of several methods used to resolve concerns of individuals. OEOS staff can explain the applicable procedure and the investigation process entailed with a formal complaint.

Please be advised that:

- You should make a copy of the intake/paperwork **BEFORE** submitting documents to OEOS.
- Formal complaints **MUST** be filed within 180 days of the most recent act.
- Completing an intake form (vs. complaint form) is for review purposes only
- Information contained on the form is held confidential in this office.
- If you realize you have left something out or something happens after you submit your complaint form, please contact our office to let us know.

GENERAL INFORMATION:

Name: _____ Employee or Student#: _____

Title or Grade: _____

(For students only) Name of parent/legal guardian: _____

Department or School name: _____

Mailing address: _____

City and zip: _____

Phone number: cell () work () home _____

Email address: _____

Please indicate the reason(s) why you believe you have been treated differently:

Race Color National Origin Ethnicity

Sex/gender Gender Identity Sexual Orientation Disability

Sexual Harassment Religion Veteran Status Age

Other protected status as defined by law: _____

Retaliation for complaining about civil rights violations or participating in a civil rights investigation.

OEOS offers a mediation program to resolve complaints

Are you interested in mediating your complaint? Yes No
I'm not sure; I would like to know more. Yes No

OEOS IS ONLY AUTHORIZED TO INVESTIGATE CIVIL RIGHTS VIOLATIONS. IF YOUR COMPLAINT DOES NOT FALL INTO ANY OF THESE CATEGORIES, WE WILL TRY TO DIRECT YOU TO THE APPROPRIATE PLACE TO GET HELP!

What result do you want/expect from filing this complaint?

1. Who do you believe has violated your civil rights?

a. Name: _____

Title/Grade: _____

School/Department: _____

b. Name: _____

Title/Grade: _____

School/Department: _____

2. When did the civil rights violation(s) take place? (Please be advised that complaints must be filed **within 180 days** of the most recent act).

Date: _____ Date: _____

Time: _____ Time: _____

Location: _____ Location: _____

3. How often did the alleged conduct or wrongdoing occur?

once **once** a day **twice** a day **weekly** **other** (_____)

4. To whom did you report the incident?

a. Name: _____ Title: _____

School/Department: _____ Was the report recorded? **yes** no

Reporting method: **in** person **phone** written/email/fax

b. Name: _____ Title: _____

School/Department: _____ Was the report recorded? **yes** no

Reporting method: **in** person **phone** written/email/fax

6. Did this "harasser" behave in this manner with any other students or employees?
__yes __no

Did anyone see the "harasser" behave in this manner? __yes no

If you answered yes to either question, indicate the name and addresses below:

a. Name: _____
Address: _____
City and zip: _____
Phone: _____
Email: _____

b. Name: _____
Address: _____
City and zip: _____
Phone: _____
Email: _____

c. Name: _____
Address: _____
City and zip: _____
Phone: _____
Email: _____

7. Do you have an attorney who is representing you at the present time? If so, please furnish his/her name, the name of the law firm, telephone number, and complete address:

Attorney's name: _____
Law firm name: _____
Phone number: _____
Address: _____
City and zip: _____

8. Have you filed a charge with the Equal Employment Opportunity Commission (EEOC), Office of Civil Rights (OCR), New Mexico Human Rights Division, or any other government agency concerning allegations which you are raising in your charge of discrimination with this department?

Yes No

(agency filed with) _____
(date filed) _____

It is your responsibility to notify OEOS and the District IN WRITING of any changes in your address or telephone number. Notification should be provided to OEOS WITHIN ONE WEEK from the effective date of any change.

If your claim qualifies for formal investigation, we will contact the witness(es) you have named and request an interview. In order to preserve the integrity of the investigation, please do not discuss their part in the investigation with them.

Participation in a civil rights investigation is an activity protected by federal law. Harassment or retaliation against someone for his/her participation in an investigation may violate this law. In order to preserve confidentiality, we will not be able to tell you what they said, when we spoke to them or if they declined to be interviewed.

The Albuquerque Public School Office of Equal Opportunity Services has an obligation to protect the complainant when conducting an investigation or participation in the mediation. OEOS also has an obligation to preserve the due process rights of the respondent.

By signing or submitting below, I am indicating that I understand my identity and my complaint will be made known to the respondent. Other information related to the internal complaint and filed with OEOS will only be disseminated to appropriate personnel.

Signed

Date

As a student or employee of the Albuquerque Public Schools (APS), you have the right to file an internal complaint with the APS Office of Equal Opportunity Services, file a complaint with another human rights agency, or seek legal counsel. **IF LEGAL COUNSEL IS SOUGHT, YOU ARE RESPONSIBLE FOR ALL FEES INCURRED.** If employees have concerns regarding the negotiated agreement, contact your bargaining unit for assistance.

<p>APS Office of Equal Opportunity Services</p> <p>Mailing address: Albuquerque Public Schools Office of Equal Opportunity Services PO Box 25704 Albuquerque, NM 87125</p> <p>Physical address: 6400 Uptown Blvd. NE Albuquerque, NM 87110</p> <p>Phone: (505) 855-9853 or (505) 955-9831</p> <p>http://www.@S.edu/d@artments/equal-op_Q_ortunitY_-services</p>	<p>Employees, students parents, applicants and all others.</p> <p>All Civil Rights concerns: discrimination or harassment on the basis of color, race, national origin, ethnicity, sex/gender, sexual orientation, gender identity, age, religion, veteran status, disability, or other protected status as defined by civil rights law; sexual harassment; retaliation for complaining about civil rights violation or participating in a civil rights investigation.</p>
<p>State of New Mexico, Department of Labor Human Rights Division 1596 Pacheco St. Santa Fe, NM 87502</p> <p>Phone: (505)827-6838 or (800)566-9471</p> <p>http://www.dws.state.nm.us/LaborRelations/HumanRightsInformation</p>	<p>Employees and applicants</p>
<p>U.S. Equal Employment Opportunity Commission 505 Marquette NE, Suite 900 Albuquerque, NM 87102</p> <p>Phone: (800)669-4000</p> <p>http://eeoc.gov/</p>	<p>Employees and applicants</p>
<p>U.S. Department of Education Office for Civil Rights 1244 Speer Blvd., Suite 310 Denver, Co. 80204-3582</p> <p>(303)844-5695</p> <p>http://www2.ed.gov/about/offices/list/ocr/index.html</p>	<p>Students, parents employees and applicants</p>

This is not an all-inclusive list. If you have any questions regarding a specific concern and what agency or department to contact, please contact OEOS at 855-9853 or 855-9831.