

# Report of Employee Discrimination, Harassment or Misconduct

Please use this form to report a complaint involving a CVSD employee. To report the harassment, intimidation or bullying of a student, please complete the *Incident Reporting Form* which can be found at [www.cvsd.org/policies/](http://www.cvsd.org/policies/).

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

CVSD Employee    Parent    Student    Other: \_\_\_\_\_

**Basis for alleged discrimination, harassment, misconduct:**

- Age
- Disability
- National origin
- Race/ethnicity
- Religion
- Retaliation
- Sex/gender
- Other: \_\_\_\_\_

**Statement of complaint:** Describe in your own words the nature of your complaint, including all relevant names, dates, and places necessary to understanding your concerns. Please attach additional pages if needed.

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**Remedies sought:** Describe what you would like to see as a resolution to your complaint:

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Harassment or Misconduct

Have you discussed this matter with the individual(s) involved?  Yes  No

If yes, who did you speak with and when?

Name	Date

What was the outcome of your discussion(s)?

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I understand that CVSD may request additional information, and if such information is available, I shall present it upon request.

**Send this completed form to:**  
HR / Compliance Officer  
Central Valley School District  
19307 E. Cataldo Ave.  
Spokane Valley, WA 99016

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**CVSD HR OFFICE USE ONLY:**

Date received:	Received by:	Investigated by:
Disposition:		