



Manatee County School District

Equity Action Complaint Filing Form

The purpose of this form is to assist you in presenting your complaint, in accordance with the Policy Prohibiting Discrimination and Harassment. Please provide as much detail as possible. Attach any documents that will support your statement. If you require more space, feel free to attach additional pages. All the information provided must be true and accurate. The completed form should be submitted to the Equity Coordinator. Submit this form by emailing it to equitycoordinator@manateeschools.net. You may also submit this form to:

Equity Coordinator
School District of Manatee County
215 Manatee Ave. West
Bradenton, FL 34205
OR Fax: (941) 708-8878

Date: _____

Your Name/Position: _____

Address/School/Location: _____

Telephone: _____

Email: _____

What is the name of the respondent/accused? Please include position.

When and where did the alleged incident(s) occur?

Did you report the alleged incident(s) to a worksite administrator or another employee?
If yes, please provide name(s).

Please note it is against District policy for anyone to retaliate against your for filing a complaint.

Signature of Grievant

Date

Received By

Date