

Discrimination Complaint/Grievance Procedure

Complaints regarding the interpretation or application of the College's nondiscrimination policy shall be processed in accordance with the following procedures:

Informal Procedure

Any person who feels that he/she has been discriminated against should discuss the matter with the compliance officer who shall in turn investigate the complaint and respond to the complainant within five business days. If this response is not acceptable to the complainant, he/she may initiate formal procedures.

If the compliance officer is the subject of the complaint, the individual may file a complaint directly with the President. If the President is the subject of the complaint, the complaint may be filed with the Board chair.

Formal Procedure

- Step 1: A written complaint must be filed with the compliance officer within five business days of receipt of the response to the informal complaint. The compliance officer shall further investigate, decide the merits of the complaint and determine the action to be taken, if any, and reply in writing to the complainant within 10 business days.
- Step 2: If the complainant wishes to appeal the decision of the compliance officer, he/she may submit a written appeal to the President within five business days after receipt of the compliance officer's response to the complaint. The President shall meet with all parties involved, as necessary, make a decision and respond in writing to the complaint within 10 business days.
- Step 3: If the complainant is not satisfied with the decision of the President, a written appeal may be filed with the Board within five business days of receipt of the President's response to Step 2. In an attempt to resolve the complaint, the Board shall meet with the concerned parties and their representative at the next regular or special Board meeting. A copy of the Board's decision shall be sent to the complainant within 10 business days of this meeting.

Discrimination Complaint Form

Name of Person Filing Complaint	Date	Activity	
Student <input type="checkbox"/> Employee <input type="checkbox"/> Nonemployee <input type="checkbox"/> (Job applicant)			
Type of discrimination:	<input type="checkbox"/> Race	<input type="checkbox"/> Color	<input type="checkbox"/> National Origin
	<input type="checkbox"/> Religion	<input type="checkbox"/> Sex	<input type="checkbox"/> Age
	<input type="checkbox"/> Disability	<input type="checkbox"/> Veterans' Status	<input type="checkbox"/> Sexual Orientation
	<input type="checkbox"/> Marital Status	<input type="checkbox"/> Other	

Specific complaint: (Please provide detailed information including names, dates, places, activities and results of informal discussion.)

Remedy requested:

The complaint form should be mailed or taken to the compliance officer. Direct complaints related to educational programs and services may be made to the U. S. Department of Education, Office for Civil Rights. Direct complaints related to employment may be filed with the Oregon Bureau of Labor and Industries, Civil Rights Division, or the U. S. Department of Labor, Equal Employment Opportunities Commission.