

**COMPLAINT FORM
NATIONAL PARLIAMENTARY TOURNAMENT OF EXCELLENCE
HARASSMENT AND VIOLENCE POLICY**

DATE FORM WAS COMPLETED:	
COMPLAINANT'S NAME:	
<input type="checkbox"/> <i>I wish to file this complaint but remain anonymous (check box if applicable)</i>	
COMPLAINANT'S SCHOOL (IF ANY):	
COMPLAINANT'S PHONE NUMBER:	COMPLAINANT'S EMAIL:
ADDRESS FOR COMPLAINANT (OPTIONAL):	
<small>UNDER NO CIRCUMSTANCES MAY A COMPLAINANT WHO FILES A COMPLAINT IN GOOD FAITH BE THREATENED OR RETALIATED AGAINST FOR AN ALLEGATION OF UNLAWFUL HARASSMENT OR DISCRIMINATION.</small>	

DATE OF INCIDENT:
NAME OF INDIVIDUAL ABOUT WHOM COMPLAINT IS BEING MADE (IF KNOWN):
ROLE OF INDIVIDUAL IN NPTE QUALIFYING EVENT (IF ANY):
INDIVIDUAL'S SCHOOL AFFILIATION (IF KNOWN):
LOCATION(S) WHERE INCIDENT(S) OCCURRED:
PLEASE BRIEFLY DESCRIBE THE FACTS LEADING TO THIS COMPLAINT:
<input type="checkbox"/> <i>See more information attached (check box if applicable)</i>
OUTCOME COMPLAINANT IS HOPING TO ACHIEVE:
<input type="checkbox"/> <i>I wish to see this matter resolved informally (check box if applicable)</i>
SIGNATURE OF COMPLAINANT: <input type="checkbox"/> <i>Anonymous Complaint (check box if applicable)</i>
<i>Date</i>

Please send completed form to President Joe Gantt at jgantt@lclark.edu or to any other Board member (email addresses available at <http://npte.debateaddict.com/static/board.htm>)