

# Inquiry Form

## UNT Office of Equal Opportunity

Hurley Administration Building, Suite 175 • (940) 565-2759 • OEO@unt.edu

1 Complainant Contact Information						
Student	Faculty*	Staff*	Visitor	Alumni	Current	Former
<b>Name</b>			<b>Phone Number</b>			
<b>Email</b>			<b>Employee/Student ID Number</b>			
<b>Address</b> City, State, Zip						
*If you checked <i>Faculty</i> or <i>Staff</i> above, please indicate the department and title.						
<b>Department</b>			<b>Title</b>			

2 Respondent						
Student	Faculty*	Staff*	Visitor	Alumni	Current	Former
<b>Name</b>			<b>Phone Number</b>			
<b>Email</b>						
<b>Address</b> City, State, Zip						
*If you checked <i>Faculty</i> or <i>Staff</i> above, please indicate the department and title.						
<b>Department</b>			<b>Title</b>			

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**Nature of alleged violation of university non-discrimination policy**  
(include date, time period and description)

**Category of Inquiry** (check all that apply)

Discrimination

Harassment

Retaliation

**Type of Inquiry** (check all that apply)

Age

Color

Disability

Gender Identity  
& Expression

National Origin/  
Citizenship

Sex

Religion

Race  
& Ethnicity

Sexual Misconduct  
(check all that apply):

Sexual Assault

Sexual Harassment

Political  
Affiliation

Genetic  
Information

Sexual  
Orientation

Sexual  
Violence

Stalking/Relationship  
Violence

Veterans'  
Status

Marital  
Status

Other

**Name (Signature)**

**Date**

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**Action taken by OEO**

Accepted for Complaint \_\_\_\_\_

Referral \_\_\_\_\_

Closure