OFFICE OF DIVERSITY AND EQUITY
WITHDRAWAL FORM

NOTE: Any filed action, including a discrimination complaint form, may be withdrawn at any time during the informal resolution and/or investigation process. Only the Complainant may withdraw a filed inquiry, complaint or request. Requests for withdrawals must be submitted in writing to the Chief Diversity Officer. The University reserves the right to continue with any filed investigation, if it is warranted. In a case where the University decides to continue with a filed investigation, the Complainant will be notified. In either event, as it pertains to complaint investigations, the Respondent/Accused will also be notified in writing that the Complainant has withdrawn a filed complaint and/or whether University officials determined that continuation of an investigation is warranted for corrective purposes.

Today’s Date: ____/___/_______    BANNER ID: __________________

Name of Complainant/Requestor:  __________________________________________________   __________________________________________________
(First Name) (MI) (Last Name)

If the Complainant/Requestor is an Employee/Faculty:

Department Name: ______________________________________________________
Office Title: ___________________________________________________________
Office Location: _______________________________________________________

I. ________________________, voluntarily request to withdraw one or more of the identified action(s) with the university’s Office of Diversity and Equity:

☐ EEO Inquiry – Informal Complaint/Review
☐ University Discrimination Complaint Form
☐ Request for Reasonable Accommodation for a Medical Disability
☐ Request for Reasonable Accommodation for Religious Observance in the Workplace
☐ Other: __________________________________________________________________

Please describe/state your reason for this withdrawal:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Complainant/Requestor’s Signature: ________________________________________________