



CASE#: _____

DATE OPENED: _____

ONLINE CONFIDENTIAL INTAKE FORM

Contact Date & Time: _____

Initial Contact Method: _____

CONTACT INFO

First Name: _____

Last Name: _____

Position on Campus:

Student Staff Faculty

Administration Other: _____

Department: _____

Mailing Address: _____

Phone: _____

UWin e-mail: _____

Can we leave a message? Yes No

RESPONDENT INFO (if applicable)

First Name: _____

Last Name: _____

Position on Campus:

Student Staff Faculty

Administration Other: _____

Department: _____

Mailing Address: _____

Phone: _____

UWin e-mail: _____

Can we leave a message? Yes No

NATURE OF INQUIRY/CONCERN

Academic Accessibility Consultation Discrimination Enquiry

Harassment PCEE Procedural Systemic

Non-Code related: _____ Other: _____

FOUNDATIONS (circle all that apply)

- Race • Ancestry • Place of Origin • Colour • Ethnic Origin • Citizenship • Creed • Sex • Sexual Orientation • Gender Identity/Gender Expression • Disability • Age • Marital Status • Family Status
- Receipt of Public Assistance • Record of Offences

INQUIRY/CONCERN DETAILS (Attach pages if necessary)

For questions or to submit the completed form please see:

Office of Human Rights, Equity & Accessibility (OHREA)
401 Sunset Avenue Windsor, Ontario N9B 3P4
T 519-253-3000 x. 3400 F 519-973-3673

Concerns brought to our Office are handled in a confidential manner. The discreet disclosure of information may be necessary to gather the facts or implement and/or monitor the terms of a resolution. Please sign to acknowledge agreement with the accuracy of the concern details.

SIGNATURE: _____ **DATE:** _____

FOR OFFICE USE ONLY

INTAKE FORM TAKEN BY: _____

CASE HANDLED BY: _____

Resolution:

Date & Signature