



Office of Discrimination and Harassment

Administrative Research Center - East Campus
3100 Marine Street, Third Floor, 565 UCB
Boulder, Colorado 80309-0565
303-492-2127 Fax: 303-735-3236

ODH Training Acknowledgement Form

I, _____, (print name and Employee id number) have viewed the Office of Discrimination and Harassment ODH Training video. I have also received the information provided by the Office of Discrimination and Harassment that included the following:

- University of Colorado Administrative Policy Statement: Sexual Harassment Policy and Procedures
- University of Colorado Administrative Policy Statement: Conflict of Interest in Cases of Amorous Relationships
- University of Colorado at Boulder Discrimination and Harassment Policy and Procedures
- Appendix of UCB campus resources
- Office of Discrimination and Harassment brochure
- Training Evaluation Form

I have read and understand the policies, as well as my reporting obligations. I understand that if I have any questions about the training video, the policies, or any of the information provided to me, that I may contact the Office of Discrimination and Harassment at 303-492-2127.

Employee Signature

Date

Please return this signed form to:
The Office of Discrimination and Harassment
Attn: Tangie Sutton
Administrative Research Center - East Campus
3100 Marine Street, Third Floor, 565 UCB
Boulder, Colorado 80309-0565
303-492-2127 Fax: 303-735-3236

****Please keep a copy for your records