

Sample Sexual Misconduct Complaint Form

Complainant's Name: _____ Telephone Number: _____

Mailing address: _____

Email: _____ Circle One: Student, employee, faculty, other _____

RESPONDENT(S):

The person(s) against whom the complaint is being filed or a description of what is known about the person(s) in the event their name(s) are unknown, and their relationship to the school if known.

Name or description: _____

Name or description: _____

Name or description: _____

Name or description: _____

DESCRIPTION:

Please list the date(s), and place(s) of alleged violation(s); the nature of the alleged violation(s); detailed descriptions of the specific conduct that is the basis of alleged violation(s); and attach copies (do not attach originals) of documents pertaining to the alleged violations if they exist.

WITNESSES

List everyone you believe can provide relevant information regarding your complaint. Include contact information if possible, and the witness's relationship to the school if it is known. In the event a witness is unknown to you, provide a description.

ACTION(S) REQUESTED

List the actions you're requesting the school to undertake to resolve the situation. List accommodations and support you need from the school:

ACKNOWLEDGEMENT

By completing and submitting this form, I am initiating a complaint which I request be investigated according to the process outlined in (school policy name) on page (page number). I certify that the information I have provided is true and accurate to the best of my knowledge.

Signature: _____ Date: _____

CONTACT INFORMATION

Title IX Coordinator Contact Details	Deputy Title IX Coordinator Contact Details	Other Relevant Contact	Other Relevant Contact
---	---	------------------------	------------------------