



Series 4000
Personnel

COMPLAINT FORM REGARDING SEXUAL HARASSMENT (PERSONNEL)

This complaint form should be used for complaints of sexual harassment as defined on page 1 of the Board's Administrative Regulations regarding the Prohibition of Sex Discrimination and Sexual Harassment (Personnel)

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| Name of complainant | |
| Date of the complaint | |
| Date of the alleged sexual harassment | |
| Name or names of the sexual harasser(s) | |
| Location where such sexual harassment occurred | |
| Name(s) of any witness(es) to the sexual harassment | |
| Detailed statement of the circumstances constituting the alleged sexual harassment | |
| Remedy requested | |

Signature of Complainant: _____

Signature of Title IX Coordinator: _____