Appendix A Complaint Form

Today's date:
Information Regarding the Complainant Name of the Complainant: Complainant's Phone Number:
The Complainant is (please check one): \Box faculty \Box student \Box staff \Box not affiliated with the College For faculty, staff, & students, indicate whether \Box current or \Box former
Information Regarding the Alleged Victim (if he or she is not the Complainant): Name of the alleged victim:
The alleged victim is (please check one): \Box faculty \Box student \Box staff \Box not affiliated with the College For faculty, staff, & students, indicate whether \Box current or \Box former
Information Regarding the Respondent: Name of the Respondent: Respondent's phone number (if known):
The Respondent is (please check one): faculty student staff not affiliated with the College For faculty, staff, & students, indicate whether current or former
Information Regarding the Alleged Misconduct (sexual harassment, sexual violence, domestic violence, dating violence, or stalking):
Time and date of the alleged Misconduct:
Witnesses or third parties who may have information regarding the alleged Misconduct, along with phone number, if known:
Please provide a brief description of the alleged Sexual Misconduct: You may wish to consider including, among other things, some or all the following information in your description: the gender of the parties, the relationship between the parties, whether one or more of the parties were under the influence of alcohol or drugs at the time of the alleged Misconduct, whether the Respondent used pressure or force (physical or otherwise) in the course of the alleged Misconduct, and the frequency (if applicable) of the alleged Misconduct.

Please feel free to use the reverse side of this form or separate pages to continue your description, if desired.