SEXUAL HARASSMENT COMPLAINT FORM

New York State Labor Law requires all employers to adopt a sexual harassment prevention policy that includes a complaint form for targets to report alleged incidents of sexual harassment. This form is intended to be used by both students and employees.

If you believe that you have been subjected to sexual harassment, you are encouraged to complete this form to the best of your ability and submit it to [insert title, person or office designated; contact information for designee or office; how the form can be submitted]. You will not be retaliated against for filing a complaint. If you are more comfortable reporting verbally or in another manner, the district should complete this form, provide you with a copy and follow its sexual harassment prevention policy by investigating the claims as outlined at the end of this form.

For additional resources, visit: https://www.ny.gov/programs/combating-sexual-harassment-workplace

YOUR INFORMATION (for all persons making a complaint):

Your Name: _____________________________________________________________

Home Address: __________________________________________________________

Home or Cell Phone: _____________________________________________________

Email Address: __________________________________________________________

School (for students): ____________________________ Grade/Class (for students): ______

Work Address (for employees): ____________________________________________

Work Phone (for parents/guardians/employees): ______________________________

Job Title (for employees): ________________________________________________

Preferred Communication Method (please circle one): phone  email  mail  in person

SUPERVISOR INFORMATION (for employees)
Immediate Supervisor’s Name: __________________________________________

Supervisor’s Title: __________________ Work Phone: __________

Supervisor’s Work Address: __________________________________________

COMPLAINT INFORMATION (for all persons making a complaint)

1. Your complaint of Sexual Harassment is made against:
   Name: __________________________________________________________
   Job Title (if an employee): __________________ Grade/Class (if student): ___
   School Address/Work Location (if known): ____________________________
   Phone (if known): ________________________________________________
   Relationship to you (please circle one below):
   (for employees)
      Supervisor / Subordinate / Co-Worker / Student / Other: ____________
   (for students)
      Teacher / Other staff member / Other Student / Other: ______________

(Please use additional sheets of paper if the complaint is against multiple people.)

2. Please describe what happened and how it is affecting you and your work or education. Please use additional sheets of paper if necessary and attach any relevant documents or evidence.

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

3. Date(s) and location(s) sexual harassment occurred: _________________

   Is the sexual harassment continuing? ____ Yes ____ No

4. Please list the name and contact information (if known) of any witnesses or individuals who may have information related to your complaint:
The following question is optional, but may help the district's investigation.

5. Have you previously complained about or provided information (verbal or written) about sexual harassment or related incidents to the district? ____ Yes   ____ No

   If yes, when and to whom did you complain or provide information?

If you have retained legal counsel and would like us to work with them, please provide their contact information:

Print Name: ____________________________

Signature: ____________________________

Date: ______________________

Instructions for the District

If you receive a complaint about alleged sexual harassment, you must follow the district’s sexual harassment prevention policy by investigating the allegations through actions including:

- Speaking with the complainant
- Speaking with the alleged harasser
- Interviewing witnesses
- Collecting and reviewing any related documents

While the process may vary from case to case, all allegations should be investigated promptly and resolved as quickly as possible. The investigation should be kept confidential to the extent possible. Document findings of the investigation and basis for your decision along with any corrective actions
taken, and notify the complainant (if the complainant is a student, also notify the parent/guardian) and the individual(s) against whom the complaint was made. This may be done via email.