Name of person filing the Complaint: ____________________________________________

(Note: Reports may be made anonymously, but no disciplinary action will be taken against an alleged accused solely on the basis of an anonymous report.)

Check whether you are the:  □ Complainant    □ Witness
Check whether you are a:    □ Student    □ Faculty    □ Administrative Staff Member
□ Other (specify): ______________________________________________________________

Your contact information/telephone number(s): _______________________________________

Name of complainant/target: _______________________________________________________

Name of accused: _________________________________________________________________

Description of accused: □ Student    □ Faculty    □ Administrative Staff
□ Other (specify): _________________________________________________________________

Date, time and location of incident(s): _______________________________________________

Witnesses (list persons who saw the incident or have information about it):

Name: __________________________________________
□ Student    □ Staff    □ Other (specify): ____________________________

Name: __________________________________________
□ Student    □ Staff    □ Other (specify): ____________________________

Details of the incident (please describe what occurred and who was involved using as much detail as possible):

_______________________________________________________________________________

For claims of retaliation, please explain the basis of the claim:

_______________________________________________________________________________

Other notes:  _________________________________________________________________

_______________________________________________________________________________

Signature of Person Filing the Complaint    Date    Name Printed

Signature of Person Receiving the Complaint    Date    Name Printed