

# TITLE IX FORMAL COMPLAINT PROCEDURE FORM (Students and Employees)

A Formal Complaint is required to begin an investigation on the Policy on Sexual Harassment, Sexual Assault, Dating and Domestic Violence, and Stalking ("Policy").

Prior to completing this form, a representative from the Office of Inclusion, Equity, and Diversity will:

1. Discuss the availability of Supportive Measures with or without filing of a formal complaint;
2. Explain the process for filing a formal complaint; and
3. Review the investigation, hearings, and appeals process associated with Policy.

### Definitions:

"Prohibited Conduct is defined as Sexual Harassment (including Sexual Assault, Domestic Violence, Dating Violence, and Stalking), Sexual Exploitation, and Retaliation.

The "Complainant" means an individual who is alleged to be the victim of conduct that could constitute Prohibited Conduct, regardless of whether that person makes a report or seeks action under this Policy.

The "Respondent" means an individual who has been reported to be the perpetrator of conduct that could constitute Prohibited Conduct.

Name of Complainant _____	
Department _____	Campus _____
Phone Number _____	Email _____
Status of Complainant <input type="checkbox"/> Staff <input type="checkbox"/> Faculty <input type="checkbox"/> Student <input type="checkbox"/> Fellow <input type="checkbox"/> Medical Resident <input type="checkbox"/> Post Doc <input type="checkbox"/> Other: _____	
Type of Complaint <input type="checkbox"/> Formal <input type="checkbox"/> Informal	

  

Name of Respondent(s) _____	
Department _____	Campus _____
Status of Respondent(s) <input type="checkbox"/> Staff <input type="checkbox"/> Faculty <input type="checkbox"/> Student <input type="checkbox"/> Fellow <input type="checkbox"/> Medical Resident <input type="checkbox"/> Post Doc <input type="checkbox"/> Other: _____	
Relationship of Respondent(s) to Complainant <input type="checkbox"/> Coworker <input type="checkbox"/> Supervisor <input type="checkbox"/> Client/Customer <input type="checkbox"/> Faculty <input type="checkbox"/> Student <input type="checkbox"/> Fellow <input type="checkbox"/> Medical Resident <input type="checkbox"/> Post Doc <input type="checkbox"/> Other: _____	

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Describe the Prohibited Conduct regarding the specific act(s) alleged with date(s), time(s), and location(s) if possible. If additional space is needed, use reverse side of paper or attach additional sheet(s)

**The Formal Complaint and Notice**

The Formal Complaint form serves to initiate a complaint under the Policy. Once the document is completed, it will be submitted to the Office of Inclusion, Equity, and Diversity for intake and investigation.

The information shared in this document will be utilized to complete a notification document that will be sent simultaneously to both the Complainant and Respondent.

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is an all-encompassing federal law that prohibits discrimination based on gender of students and employees of educational institutions which receive federal financial assistance. When the form has been completed and signed by you, and then signed by the Title IX Coordinator or a Deputy, your complaint has been properly received and noted by UTHSC. We will provide you with a copy of this form as well as complete information about the Title IX complaint process. If you require emergency assistance, please call security at: 609-570-3200.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

**OIED Office Use Only**

This Formal Complaint, based on the information above, meets criteria under the Policy as:

Title IX Prohibited Conduct

Non-Title IX Prohibited Conduct

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_