

# MONROE COUNTY COMMUNITY COLLEGE

## Title IX/Sexual Harassment Complaint Form

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is an all-encompassing federal law that prohibits discrimination based on the gender of students and employees of educational institutions which receive federal financial assistance. **When the form has been completed and signed by you, please forward to the Title IX Coordinator (Linda Torbet, Director of Human Resources or the Vice President of Enrollment Management and Student Success).** If you require emergency assistance, please call security at: **734-384-6007**.

The Title IX Coordinator will process the complaint..	I am filing this complaint as a: check one: (v) <input type="checkbox"/> Anonymous <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student
	Name
	Department (if applicable) School (if applicable)
	Cell Phone:
	Home Address:
	Employee ID Student ID
Have you brought this matter to the attention of any other department(s) at the College? If so, please list the name(s) and department(s) of all other persons with whom you have discussed this matter.	
Type of Complaint: Check all that apply (v) <input type="checkbox"/> Sexual Harassment (unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature) <input type="checkbox"/> Sexual Assault <input type="checkbox"/> Sexual Misconduct (rape, sexual assault, sexual battery, sexual exploitation and other forms of non-consensual sexual activity) <input type="checkbox"/> Stalking (repeatedly following, harassing, threatening or intimidating including by telephone, mail, electronic communication or social media) <input type="checkbox"/> Rape <input type="checkbox"/> Retaliation (adverse employment, academic or other actions against anyone reporting or participating in an investigation of Title IX allegations) <input type="checkbox"/> Relationship Violence <input type="checkbox"/> Dating Violence (including emotional, verbal, and economic abuse without the presence of physical abuse) <input type="checkbox"/> Domestic Violence (including emotional, verbal and economic abuse without the presence of physical abuse)	

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**Complaint:** Describe your complaint. Please summarize below and attach additional pages describing your complaint if necessary.

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Name of person or persons you believe committed the offense against you and how you have contact with them, e.g. supervisor, co-worker, faculty, customer.

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Describe the corrective action you are seeking. Attach additional pages if necessary.

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For retaliation complaints, please explain why you believe someone retaliated against you:

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**Witnesses** (The relationship information requested means co-worker, supervisor, customer, faculty, etc.)

	Relationship	Telephone
1.		
2.		
3.		

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I certify the aforementioned is true and correct.



Your signature \_\_\_\_\_ Date \_\_\_\_\_

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**For the Title IX Coordinator and/or Designee**

**Complaint taken by**

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

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