

**REPORT OF SEXUAL HARASSMENT / DISCRIMINATION
TITLE IX**

REPORT FILED BY: _____
(Any person may file a report.)

COMPLAINANT'S NAME: _____
(The student or employee who is alleged to be the victim of conduct that could constitute sexual harassment.)

RESPONDENT'S NAME: _____
(The person who has been reported to be the individual accused of conduct that could constitute sexual harassment.)

DATE OF THE ALLEGED VIOLATION: _____

LOCATION OF THE ALLEGED VIOLATION: _____

DETAILED DESCRIPTION OF ALLEGED VIOLATION: _____

NAMES OF ANY WITNESSES: _____

Signature
Kds10102020

Date