FORMAL COMPLAINT OF
SEXUAL HARASSMENT

Complainant Name: _____

Home Address: _____

Phone Number: _____

Email Address: _____

Date/Time of Incident: _____

Location of Incident: _____

Name of Respondent: _____

Description of Incident (may attach additional pages): _____

_____

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_____

The information I have submitted is true, accurate, and complete to the best of my knowledge.

Signature of Complainant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

(If under 18 years of age)